THE

MEDICAL EXAMINER.

NEW SERIES.—NO. CXXXIX.—JULY, 1856.

ORIGINAL COMMUNICATIONS.

EXPERIMENTS UPON DIGESTION.

By Francis G. Smith, M. D.,

Professor of the Institutes of Medicine in the Medical Department of Pennsylvania College.

An opportunity was lately afforded to the writer of examining and experimenting upon Alexis St. Martin, the Canadian, with a fistulous orifice in his stomach; a man whose name is familiar to almost every medical student as the subject of the experiments upon digestion performed by the late Dr. Wm. Beaumont, of the U. S. Army.

It will be remembered that, when quite a lad, St. Martin received the contents of a loaded gun, accidentally discharged. The charge, consisting of powder and duck shot, took effect in his left side, and after tearing away the integuments, muscles, portions of the fifth and sixth ribs and of the left lung and diaphragm, perforated the stomach, creating a wound through which the contents of the latter organ escaped by an orifice large enough to admit the forefinger. This orifice has never closed, although the surrounding wound cicatrised readily.

The man has enjoyed general good health, and has been the father of a large family, whom he has supported, up to the present time, by hard labor.

With one single exception, that of the Esthonian peasant reported by Grunewald and Schroeder, St. Martin is the only in-

stance in which the opportunity of watching the process of digestion, in an otherwise healthy person, has ever been afforded; the case reported by Circaud in the Jour. de Physiologie, so far as we can learn, never having been experimented upon.*

The experiments performed by Dr. Beaumont are so familiar to every student of physiology, that any analysis of them is uncalled for, even if the limits of this journal permitted it. The object of the present paper is merely to detail the results of recent observations, and compare them with those obtained from other sources.

Several questions relating to the physiological action of the stomach may be regarded as still unsettled; among these is that relating to the nature of the acid contained in the gastric juice, and the influence of this secretion upon the various alimentary principles as classified by Prout, to wit, saccharine, oleaginous and albuminous food. The present paper will be devoted to the consideration of these points.

It must be premised that the analyses were made upon the fluids obtained from the stomach while digestion was in progress, for that which was withdrawn from the organ while the man was fasting, (that is in the morning, before rising from bed,) was found to be putrescent, although only twenty hours had elapsed after its reception by the writer. The analyses were conducted by the careful hands of Prof. R. E.Rogers, of the University of Pennsylvania, in the presence of the writer, who thus acknowledges the valuable aid received by him.

In every instance, and with all the kinds of food employed, the reaction of the fluid of digestion was distinctly *acid* to litmus paper, while that of the *empty* stomach, as shown by the introduction of test papers through the fistulous orifice, and of the fluid obtained by mechanical irritation, was as distinctly *neutral*. The *temperature* of the stomach, while digestion was in progress, was about 100° to 101° Fahr. When empty, about 98° to 99° Fahr.

The fluid for examination was obtained by placing the man upon his right side, and gently introducing a large sized gum elastic catheter, or a small glass speculum. He was then allowed to turn himself towards the opposite side, when the con-

* Cyc. of Anat. and Phys., Art. Digestion.

tents of the stomach would readily flow out. In no instance was food allowed to remain in the stomach longer than two hours. The mucous membrane of the empty stomach presented a pale pink color, as described by Beaumont, with the surface lubricated by mucus; when digesting, its color was deepened, and the peristaltic motion could be distinctly seen. During all the experiments St. Martin maintained his usual good health, was in excellent spirits and took his food with appetite.

Previously to the opportunity afforded to Dr. Beaumont by St. Martin's accident, specimens of gastric fluid were obtained by means of sponges attached to strings, as was done by Reaumur and Spallanzani; by exciting vomiting after eating, as recorded by Leipzig; by killing animals, while digestion was going on, as was done by Prout and others; or by establishing fistulous orifices in the stomachs of lower animals, as performed by Blondlot, Lassaigne, Bernard and Barreswill, and others since them.

All these observers, from the earliest to the latest, agree on one point, to wit, the existence of an acid reaction in the fluid of digestion; but as to the *nature* of that acid, they differ widely, some contending that it is *organic*, others that it is *mineral;* some that is acetic, lactic, or butyric acid, others that the acidity depends upon the presence of hydrochloric acid, or upon the acid biphosphate of lime. The latter theory, advanced by Blondlot, has been disproved by Dumas, Bernard and Melsens, who have shown, that not only the carbonate, but the basic phosphate of lime, are soluble in gastric juice, as are also zinc and iron, with the evolution of hydrogen gas,—properties which a solution of acid phosphate of lime does not possess.*

The analysis of the fluid obtained from St. Martin by Dr. Beaumont in 1833–4, and submitted to Prof. Dunglison, then of the University of Virginia, showed, as the latter states, the presence of "free muriatic and acetic acids, phosphates and muriates, with bases of potassa, soda, magnesia and lime, and an animal matter, soluble in cold water but insoluble in hot." Dr. Dunglison further states, "we distilled the gastric fluid, when the free acid passed over, the salts and animal matter remaining in the

* Phys. Chem., by C. G. Lehmann.

retort. The quantity of chloride of silver thrown down was astonishing."*

Previously to this analysis, in 1824, Dr. Prout had made the same assertion as to the presence of hydrochloric acid, based upon the examination of the contents of the stomachs of rabbits killed while digesting; and Braconnot, in 1835, subsequently to Dunglison, states that he obtained evidences of free hydrochloric acid in gastric juice obtained by sponging the stomachs of animals.†

More recently, Bernard and Barreswill, Pelouse and Thompson, have been led to believe, from their own experimental researches, that *lactic* acid is the agent upon which the characteristic reaction of the gastric juice depends, and attribute the presence of hydrochloric acid in the free state to the decomposition of the alkaline chlorides by the lactic acid at a high heat. Hence, supposing *lactic* acid to be present in the fluid of digestion with the chloride of sodium, the fluid which passes over by distillation will, *at first*, be destitute of hydrochloric acid; but as the liquid becomes more concentrated and the temperature rises, hydrochloric acid will pass over.‡ Lehmann denies the power of hydrochloric acid to decompose the chloride of sodium, but asserts that chloride of calcium is decomposed by lactic acid, even *in vacuo;* and that hence it is not surprising that pure gastric juice should develope vapors *in vacuo*, which, when passed into a solution of nitrate of silver, should form chloride of silver.§

Still more recently, Messrs. Bidder and Schmidt declare, as the result of eighteen corresponding analyses, "that pure gastric juice of carnivora, after eighteen to twenty hours fasting, contained *free hydrochloric acid only*, without a trace of lactic or any other organic acid; while the gastric juice of herbivora contains, with free hydrochloric acid, small quantities of lactic acid, which may, however, be referred to their more amylaceous food."‖ Grunnewald's experiments led him to the conclusion

* Experiments and Observations on the Gastric Juice, by Wm. Beaumont, M. D., Surgeon U. S. Army.

† Annales de Chimie, T. 59, p. 348.

‡ Carpenter's Human Physiology, Amer. Edit. p. 109.

§ Phys. Chem. vol. i., p. 93.

‖ Cyclopædia of Anat. and Phys., part xlvii., Art. Stomach and Intestines.

that the acid was an organic one; while Schroeder maintains that the fluid obtained by irritating the stomach by peas, owed its reaction to hydrochloric acid.*

Amidst all this conflict of opinion a reconciliation is scarcely to be hoped for; it is suggested, however, that a portion of it, at least, may be owing to the variety of animals experimented upon, and the question may be asked, whether observations made upon the human subject in the healthy condition, should not be relied upon, rather than those derived from experiments performed upon lower animals, in whom the severity of the operation and the emotions necessarily excited thereby, must unavoidably vitiate the results. The difficulty is somewhat relieved by the fact that only *two* acids are involved in the question, and it narrows itself to the decision as to whether they are both present together, or whether one substitutes the other. The following experiments may serve to decide this question.

May 6th, 1856, at 10, A. M.—Two ounces of dry wheat bread were given to St. Martin, which he masticated deliberately and swallowed. At 12½, P. M., the contents of the stomach were removed by Dr. Bunting in the presence of a number of medical gentlemen and students, and carefully preserved for immediate analysis. The reaction was *decidedly* acid, s. g. 1009. Microscopic examination showed large epithelial cells, mucous corpuscles, amorphous granular matter and starch granules, some broken down, others perfect, together with a few cells of cylinder epithelium.

Experiment 1.—A portion of the fluid thus obtained, was subjected to distillation. In the early vapor that came over, no trace of acidity could be detected by litmus paper; the distillate was neutral, neither acid nor alkaline, and did not precipitate with nitrate of silver. The distillation being carried further, so as to concentrate the material in the retort and increase its temperature, the distillate was found to become acid, and a portion being added to a solution of nitrate of silver, a faint precipitate, which was soluble in ammonia, took place. (This experiment has been repeated since, with the material discharged from the stomach, *at will*, after a meal of bread. The distillate became *distinctly* acid, but threw down the faintest

* Dissert. Inaug.

precipitate, a mere opalescence, with nitrate of silver. The acid of the distillate gave all the evidence of lactic acid.)

Ex. 2.—A portion of the material from the retort being tested with chloride of barium, gave no visible indication of sulphuric acid.

Ex. 3.—Another portion of the gastric fluid was heated in a porcelain capsule for the purpose of incineration. The vapor that escaped gave no evidence of acidity, but the residue became increasingly acid in proportion as it became more concentrated.

May 9th. Two ounces of bread moistened with water, were introduced into the stomach, through the fistulous orifice. In an hour and a half the contents were withdrawn. The fluid was very viscid, and presented, as before, a decidedly acid reaction. Some portions of the bread were undissolved, although the greater part had disappeared; sp. gr. not noted. The microscope revealed fewer epithelial cells than in the examination of the previous fluid, some mucous corpuscles and abundance of starch granules, some of which were broken down.

Ex. 4.—A portion of the fluid just obtained was decanted from the bread particles and carefully distilled, without presenting any evidence of acidity to litmus in the fumes. The distillate was acid to litmus, and when tested with nitrate of silver, presented a *very faint* indication of the preseuce of hydrochloric acid. The residue in the retort, when somewhat concentrated, gave a deep acid reaction.

Ex. 5.—A portion of the same fluid, as in Ex. 4, was gently boiled in a retort; the distillate was acid, and when tested as before, gave the same faint evidence of the presence of hydrochloric acid. The residue, when taken from the retort and examined with litmus, was found more acid than before the distillation. It was then carefully evaporated and examined from time to time, with the effect of manifesting a constantly increasing acidity so long as it remained liquid. The heat was then carried still further, so as to dry but not char the material; on moistening it with water it was found even more intensely acid. Heat was again applied and carried to *incipient* charring, and then the material was moistened and tested again, exhibiting a *diminished* acidity. The same experiment repeated and carried to increased charring, showed, on moistening the resi-

due, a still diminishing acidity, and on heating the residue to thorough charring and until all empyreumatic odor ceased to be given off, it was found that *all* acidity had disappeared.

Ex. 6.—It was suggested that the acid reaction of the residuum might be due to phosphoric acid, and that it might have been decomposed by the heat employed and the carbon which was present. To determine this, another portion of the same fluid was mixed with three drops of a solution of phosphoric acid, and the mixture was carried through the same series of experiments, giving a successively increasing acidity, with this peculiar result, however—that even after the whole material had been thoroughly charred, as before, and still more highly heated, the acid reaction still remained, thus demonstrating that the acid detected in the product of digestion in the first experiments was *not* the phosphoric.

Ex. 7.—To ascertain whether hydrochloric acid, if present in the free state, could resist the distilling heat and remain in the residuum when concentrated, a minute drop was added to a quantity of water so large as to render its reaction undetectible by litmus; and a like quantity to the fluid of digestion, and both were distilled. In both cases, a *very* distinct evidence of the presence of the acid was obtained in the distillate by a decided precipitate with nitrate of silver.

Experiments 6 and 7 go to show that the acid of the gastric juice, that at least upon which its most decided action depends, is not phosphoric acid, for it does not resist high heat, as that acid is known to do. It is probably not hydrochloric, nor acetic, for these are both highly volatile and are detected readily in the distillate by nitrate of silver.

Ex. 8.—This experiment was performed in verification of the doubt just stated, that hydrochloric acid is not present in the free state in the fluid of digestion. A portion of all the digestive fluids obtained from St. Martin, and a quantity vomited at will by another individual, were tested with pure deutoxide of manganese, without giving the slightest trace of the presence of chlorine.

Another portion of the digestive fluids was carefully filtered, and a minute trace of chloride of calcium added to it; the material was then tested with oxalic acid, when immediately the

white precipitate of oxalate of lime took place. Had any free hydrochloric acid been present, it would have prevented the appearance of the precipitate by dissolving it. To prove this, another portion of the same gastric fluid was filtered, and a minute quantity of hydrochloric acid and chloride of calcium were added to it. The addition of oxalic acid now produced *no* precipitate. (See Lehmann's Phys. Chem. p. 93, vol. i.)

It thus became a demonstration that the strong acid reaction of these gastric fluids was not due to the presence of free hydrochloric acid. It seems equally clear that it was an *organic* acid, from the fact that it was destroyed by heat, as in Ex. 5 ; and almost certain that it was lactic. To decide this doubt, a portion of the distillate and another of the residue in the retort were tested with zinc, as recommended by Lehmann, (Phys. Chem. p. 92, vol. i.,) with the effect of producing the characteristic crystals of *lactate of zinc.*

It will be remembered that in experiments 4 and 8 a faint evidence of the presence of hydrochloric in the distillate was manifested by the reaction with nitrate of silver. It will also be remembered, that Bernard and Barreswill assert that this hydrochloric acid is due to the decomposition of the alkaline chlorides at a high heat. To ascertain this the following experiment was performed :

Ex. 9.—Lactic acid was mixed with chloride of sodium, and the two were heated in a retort. The distillate gave the *faintest* possible trace of opalescence when treated with nitrate of silver. This evidence can scarcely be relied upon, for the solution above described required so high a temperature to produce ebullition, that it was difficult to prevent a spurious distillation of the chloride of sodium along with the vapor, and from this, it is believed, arose the opalescence in the reaction between the distillate and nitrate of silver. If lactic acid can decompose the chloride of sodium, it can only be in very small amount ; *chloride of calcium*, as Lehmann has shown, can be decomposed by lactic acid, and if this be present in gastric juice with lactic acid, we may have hydrochloric acid developed by distillation.

May 8th.—A meal of roast beef, with a small portion of salt as a condiment, was given to St. Martin at 2 P. M. At 3½ o'clock of the same afternoon the contents of the stomach were removed.

The fluid was viscid, inodorous, presented a flocculent deposit and a marked acid reaction; s. g. 1008. The microscope revealed numerous epithelial cells from the mucous membrane of the mouth downwards as far as the stomach, mucous corpuscles, amorphous granular matter, oil globules in great abundance, and transversely striated muscular fibres, in some of which the sarcolemma was softened and ruptured, and the sarcous elements just liberated.

The gastric fluid was carried through the same series of experiments as those to which the product of bread digestion was subjected to, and with a like result. The distillate was distinctly acid, but gave very faint traces of hydrochloric acid. The residuum became most intensely acid as it was concentrated, and the presence of lactic acid was manifested, both in the distillate and the residuum, by the test of the characteristic crystals of lactate of zinc.

From the preceding experiments the following conclusions are fairly deducible:

1st. That the secretions of the stomach when digesting are invariably acid.

2d. That the acid reaction was not due to the presence of phosphoric acid.

3d. That *if* hydrochloric acid was present, it was in very small quantities.

4th. That the main agent in producing the characteristic reaction was *lactic acid.*

It is but just to say that the experiments were conducted with the utmost care and precision, with a single eye to *truth*, and not with a view to support any favorite theory of digestion. So far from this, it may be stated, that the results arrived at are at variance with the doctrines maintained by the writer for many years. Each experiment was repeated several times, so as to leave no room for doubt, and was carefully compared with the results obtained by examination of the fluids discharged at will by another individual.

It is true that this is only one series of observations, and the first that has been published, so far as St. Martin is concerned, since the analyses of Dunglison and Emmett; and now that he has again become a subject for experimentation, perhaps other

and different results may be obtained. There may be sources of fallacy, unknown to the writer at the time, which may vitiate the conclusions arrived at; if so, they will be abandoned as readily as those formerly maintained.

Si quid novisti rectius istis, candidus imperti;
Si non, his utere mecum!

(To be continued.)

MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA.

The Medical Society of the State of Pennsylvania met, pursuant to adjournment, in the City of Philadelphia, at the Hall of the University (Department of Arts,) on Wednesday, May 28, 1856, and was called to order at 11 o'clock by the President, Dr. J. S. CARPENTER, of Schuylkill.

Dr. J. B. Biddle, in behalf of the local Committee of Arrangement, suggested the following hours of meeting, which, on motion, were agreed to:—

Wednesday, from 11 to 1 o'clock, and from 3 to 5; and on Thursday and Friday, from 9 to 1. On the afternoon of Wednesday, the members were invited to visit the Academy of Natural Sciences, and on Thursday afternoon the Girard College and the Institution for the Blind, and on Friday afternoon the Society would be conveyed by steamboat to the Lazaretto, where the country members would be entertained as the guests of the Philadelphia delegation.

On motion of Dr. H. Carpenter, Drs. W. Worthington, B. S. Janney, and C. W. Parrish, were appointed a committee to examine and report on the credentials of members.

On motion of Dr. R. P. Thomas, *Resolved*, That the Society now hear the Address of the President.

The President, Dr. J. S. Carpenter, then delivered the Annual Address.

On motion of Dr. John Schrack, the thanks of the Society were tendered to the President for his excellent Address, and a copy was requested for publication in the *Transactions*.

The Committee on Credentials reported the following gentlemen to be duly accredited by their respective Societies.

The names of those who were in attendance are marked by an asterisk.

Beaver county—Drs. *Oliver Cunningham, Beaver; *David E. Marquis, Freedom.

Berks county—Drs. *Wm. Greis, Reading; *Ed. Wallace, Reading; J. M. Matthews, Coxtown; C. H. Hunter; *Elias Kitchen, Douglassville; Wm. Moore, Womelsdorf; J. H. Wanner, Kutztown.

Bucks county—Drs. O. P. James, Doylestown; S. N. Evans, Johnsville; Philip H. Grier, Ottsville; Saml. Carey, Quakertown.

Bradford county—Drs. A. K. Axtell, Troy; *Geo. F. Horton, South Asylum.

Cambria county—Dr. *John Loman, Johnstown.

Carbon county—Dr. *D. K. Shoemaker, Rockport.

Chester county—Drs. *Wilmer Worthington, West Chester; Isaac Thomas, West Chester; *Septimus A. Ogier, Frazer; *Caleb Swayne, London Grove; *W. W. Townsend, Chatham; W. D. Hartman, West Chester; *John P. Edge, Downingtown; Jacob Price, West Chester; *Isaac R. Walker, West Chester; *C. W. Parish, Marshalton.

Delaware county—*Drs. Manly Emanuel, Marcus Hook; *Gurdon B. Hotchkin, Media; *Chas. J. Morton, Chester; *R. H. Smith, Media.

Lancaster county—Drs. John Reum, Hempfield; Abm. Eshleman, Strasburg; O. Cassidy, Lancaster; *Benj. Rohrer, Columbia; J. K. Rant, New Providence; *John L. Atlee, Lancaster; *Jos. Gibbons, Intercourse; Abm. Shellar, Mount Joy; J. L. Atlee, Jr., Lancaster; Thos. Ellmaker, Lancaster; Augustus Withers, Safe Harbor; Jos. H. Lefevre, Paradise; *Henry Carpenter, Lancaster; *J. A. Ehler, Lancaster.

Lawrence county—Drs. J. S. Cosset, New Castle; A. P. Dutcher, Enon; *D. Leasure, New Castle.

Lebanon County—Drs. *Geo. P. Lineaweaver, Lebanon; *B. F. Schneck, Lebanon; *P. B. Mish, Cornwall.

Montgomery County—Drs. *Wm. Corson, Norristown; E. K. Beaver, Worcester; Benj. Johnson, Norristown; J. A. Martin, Whitemarsh; *John Schrack, Shannonville; Cyrenius Williams, Norristown; C. Shoemaker, Jenkintown; *Wm. R. Ramsey, Norristown; *Hiram Corson, Plymouth Meeting.

Northampton County—Drs. *J. R. Ludlow, Easton; Breckenridge Clemens, Easton.

Philadelphia county—Drs. James Ash, Germantown; *Franklin Bache, Philadelphia; *T. Hewson Bache, do.; *John Bell, do.; John B. Biddle, do.; *Thos. F. Betton, Germantown; *Joseph Cason, Philadelphia; *Benj. H. Coates, do.; *D. Francis Condie, do.; *Gouv. Emerson, do.; *Robt. A. Given, do.; *John D. Griscom, do.; *W. W. Gerhard, do.; *Lewis P. Gebhard, do.; *Paul B. Goddard, do.; *Henry Hartshorne, do.; *Edward Hartshorne, do.; *Nathaniel L. Hatfield, do.; *Samuel L. Hollingsworth, do.; *Samuel Jackson, (Prof.) do.; *Saml. Jackson, (Spruce St.,) do.; *Benj. S. Janney, do.; *Wilson Jewell, do.; *Edgar Janvier, Richmond; W. L. Knight, Philadelphia; *Saml. Lewis, do.; *E. F. Leake, Frankford; *R. La Roche, Philadelphia; Chas. D. Meigs, do.; *Wm. Mayburry, do.; *J. H. B. McClellan, do.; *John Neill, do.; *Geo. W. Norris, do.; *John M. Pugh, West Philadelphia; *Lewis Rodman, Philadelphia; *Isaac Remington, do.; *Henry Y. Smith, do.; *Anthony C. Stocker, do.; *J. Henry Smaltz, do.; *Geo. B. Wood, do.; *Caspar Wister, do.; *Thos. H. Yardley, do.; *Jacob S. Zoons, Kensington.

Schuylkill county—Drs. *B. F. Shannon, Schuylkill Haven; *A. H. Halberstadt, Pottsville; *J. F. Treichler, McKenasburg; *A. Heger, Pottsville; *J. H. Wythes, Port Carbon.

Susquehanna county—Dr. L. A. Smith, New Milford.

Washington county—Drs. *Robt. Davidson, West Alexander; *J. W. Wishart, Washington.

Which report of the Committee on Credentials was, on motion, accepted.

On motion of Dr. Worthington, Dr. H. K. Neff, a member of the Huntingdon County Medical Society, was received as a Delegate from that Society, and Dr. Luke Granger, of Lawrenceville, Tioga, a county in which no Medical Society at present exists, was invited to participate in the proceedings of the session.

On motion of Dr. H. Carpenter, the reading of the minutes of the last session was dispensed with.

Dr. W. Jewell offered the following resolution, which was, on motion, agreed to.

Resolved, That a committee be appointed, consisting of one from each county in attendance, to nominate officers of the Society for the ensuing year, and that each county delegation choose its own representatives on said Committee.

On motion of Dr. A. E. Stocker, the Committee above constituted were empowered to nominate the additional members of the Committee of Publication, and to designate the place of meeting of the Society in 1857.

The following gentlemen were announced by their respective delegations as constituting the Committee to nominate officers for the ensuing year:—

Drs. Oliver Cunningham, Beaver Co.; William Greis, Berks Co.; Philip H. Greir, Bucks Co.; George F. Horton, Bradford Co.; D. K. Shoemaker, Carbon Co.; S. A. Ogier, Chester Co.; G. B. Hotchkin, Delaware Co.; H. K. Neff, Huntingdon Co.; J. A. Ehler, Lancaster Co.; D. Leasure, Lawrence Co.; G. P. Lineaweaver, Lebanon Co.; John Schrack, Montgomery Co.; J. R. Ludlow, Northampton Co.; Caspar Wister, Philadelphia Co.; B. F. Shannon, Schuylkill Co.; J. W. Wishart, Washington Co.

A letter from Dr. P. Cassidy, one of the Vice Presidents, was read, regretting his inability, from sickness, to be present and participate in the proceedings of the session.

A communication was received from Dr. R. E. Rogers, Dean of the University, inviting members to visit the Wistar and Horner Museums. Invitations were also received from the authorities of the Girard College and the Academy of Natural Sciences.

On motion, the invitations were accepted, and acknowledgments tendered to the Institutions severally.

The report of the Susquehanna County Medical Society was presented, read, and, on motion, referred to the Committee of Publication.

The report of the Blair County Medical Society was presented, and the reading proceeded with until the hour of adjournment.

Adjourned to 3, P. M.

Afternoon Session, May 28, 1856.

Society met agreeably to adjournment. President in the chair, roll called, and minutes of the morning session read and approved.

The reading of the report of the Blair County Medical Society commenced this morning, was concluded, and the report referred to the Committee of Publication.

The report of the Lawrence County Medical Society was presented, read, and on motion, referred to the Committee of Publication.

Dr. Condie reminded the Society of a resolution now in force, by which reports of more than eight pages were required to be accompanied with an an abstract of their contents, not exceeding that length.

The report of the Bradford County Medical Society was presented.

On motion of Dr. Condie, that so much of the report be read as has been prepared by the Chairman of the Sanitary Committee of that county, which was agreed to, and the portion read accordingly.

Dr. Jewell objected that this course was not in accordance with the resolution above cited by Dr. Condie, and moved that the report be referred back to the delegation from Bradford County, with instructions to prepare an abstract for presentation on to-morrow, which motion was agreed to.

The Treasurer, Dr. R. P. Thomas, presented and read his report, which was, on motion, referred to an Auditing Committee, consisting of Drs. Maybury, H. Hartshorne and Worthington.

Dr. Condie offered the following resolution:

Resolved, That a committee be appointed to examine the minutes of the last session, and report such items of unfinished business as may appear therein, in order that the same may be acted upon at the present session; which resolution was adopted, and the committee, consisting of Drs. Condie, Atlee and Greis, appointed.

The report of the Lebanon County Medical Society was presented, and on motion, read and referred to the Committee of Publication.

Adjourned to 9 o'clock A. M. to-morrow.

—

Morning Session, May 29, 1856.

The Society met pursuant to adjournment. President in the chair. On calling the roll, thirty-one members answered to their names.

Minutes of preceding meeting were read and approved.

A communication was received from the Mutual Life Insurance Company, New York, on the subject of Vital Statistics.

Dr. Betton moved that the communication be referred to a committee of three, with instructions to report during the present session of the Society—which motion was agreed to, and Drs. Betton, Condie and Jewell were appointed the committee.

Dr. Worthington presented the following preamble and resolutions, which had been adopted by the Chester County Medical Society at the stated meeting held 29th ult.:

Whereas, The medical profession, in the discharge of its various and

responsible duties to individuals and the public, is more severely taxed for charitable and benevolent purposes than any other profession, business or occupation; and *whereas*, the constant aim of its members has been to enlarge the sphere of its usefulness, by the organization of societies and the publication of their *Transactions*, for the dissemination of important information; and *whereas*, much good may result not only to the profession, but to the people generally, by a more liberal circulation of these *Transactions;* Therefore,

Resolved, That in the opinion of this Society the *Transactions* of the Medical Society of the State of Pennsylvania ought to be published by the Legislature of the State, thereby relieving the profession of this pecuniary burthen, and giving a more extended publicity to the labors of a useful institution.

Resolved, That our delegates be instructed to bring this subject before the State Society at its next Annual Meeting, with a view of making application to the next session of the Legislature for such legislation as may be deemed necessary to attain the object contemplated.

Dr. Condie moved that the communication be referred to a committee of three, with instructions to draw up a memorial embodying the sense of the resolutions, and to lay the same before the Legislature of the State at its next session; which motion was agreed to, and Drs. Condie, Betton and Worthington were appointed the committee.

A communication was received from the officers of the Hospital for Diseases of the Chest, inviting the members of the Society to visit that institution during their stay. On motion of Dr. Condie, the invitation was accepted.

Dr. Kennedy, in behalf of the Committee on Forms for County Reports, presented the following report, which was accepted, and the resolution appended was adopted:

PHILADELPHIA, May 27, 1856.

To the President and Members of the Medical Society of the State of Pennsylvania:

The Committee on Forms for County Reports beg leave to state that agreeably to the direction of the Society at last meeting, they have had printed and circulated copies of the Form as presented by them and approved by the Society.

The importance of full, accurate and uniform sanitary statistics, cannot be over-estimated, and professional as well as public duty, demands that such statistics be obtained and published.

The Committe anticipate that the experience of the coming year will suggest modifications on the Forms for the Reports by which the end contemplated may be more fully secured, and therefore request the passage of the following resolution:

Resolved, That the Committee on Forms for County Reports be, and they are hereby instructed, to continue the circulation of the printed Forms as heretofore, and to report to this Society, at the next session,

any modification of the Form which the experience of the year may show to be desirable.

Signed, ALFRED L. KENNEDY,
D. FRANCIS CONDIE,
S. L. HOLLINGSWORTH.

The Committee to Examine Minutes of last session, reported the following items of unfinished business:

Report of Committee on Vaccination, etc., p. 11. (See Vol. IV. p. 10.)

Resolutions of Chester County Medical Society, p. 12. (See Vol. IV. p. 17.)

Report of Committee on Quack Medicines, etc., p. 15.
" " Adulteration of Drugs, p. 15.
" " Extension of Organization, p. 16.
" " Death of Dr. J. P. Heister, p. 16.
" " Death of Drs. Richards and A. S. Baèr, p. 16.

Respectfully submitted,

Signed, D. FRANCIS CONDIE,
JNO. L. ATLEE.
WM. GRIES.

On motion, the report was accepted, and the committee discharged.

An abstract of the report of the Bradford County Medical Society was presented and read, and, on motion, the report was referred to the Committee of Publication.

The report of the Huntingdon County Medical Society was presented and read, and, on motion, referred to the Committee of Publication.

The names of the committee to nominate officers for the ensuing year being called for by Dr. Ehler, were read.

On motion of Dr. Wister, Dr. Worthington was appointed a member of the nominating Committee, for Chester County, in the place of Dr. Ogier, now absent.

The Nominating Committee then retired for the purpose of preparing their report.

Dr. Biddle presented and read the Report of the Board of Censors.

On motion of Dr. J. L. Atlee, the minutes of the Board of Censors were also read. Dr. Atlee enforced his motion by a reference to the importance of sustaining the Code of Ethics, to the just and manly course pursued throughout the case by the Philadelphia Society and the Board of Censors, and to the value of the decision as a precedent for future action. The motion being agreed to, the minutes of the Board were read, and the report was accepted and ordered for publication, as follows:

The Board of Censors of the 1st and 2d Districts of the "Medical Society of the State of Pennsylvania," have the honor to submit to the Society the following report of its action in the matter of the appeal of John Coleman Morgan, M. D., from the Philadelphia County Medical Society.

The Board of Censors convened pursuant to notice given, in the city of Reading, on the 24th July, 1855; present, Drs. J. B. Biddle, of

Philadelphia, Hiram Corson, of Montgomery, and Edward Wallace of Berks; and a quorum being present, the Board organized by the appointment of Dr. Biddle as Chairman, and Dr. Wallace as Secretary.

The appellant, Dr. Morgan, duly appeared in person before the Board, and the Philadelphia County Medical Society was represented by Drs. D. F. Condie, B. H. Coates, A. E. Stocker and H. Hartshorne.

The Record of the Philadelphia County Medical Society, herewith subjoined, having been read, it appeared that Dr. John Coleman Morgan, having been charged by Dr. G. Emerson, before the Censors of the Philadelphia County Medical Society, with being publicly associated with irregular practitioners in the faculty of an institution known as the Penn Medical University, and the Censors, after due investigation of the charge, having found it to be substantiated, the said Dr. Morgan was on the 18th April, 1855, at a stated meeting of the Philadelphia County Medical Society, expelled therefrom.

Dr. Morgan having appealed from this action of the Philadelphia County Medical Society, was duly heard in his defence before the Board of Censors of the 1st and 2d Districts of the Medical Society of the State of Pennsylvania, convened at the time and place above mentioned, and the Committee of the Philadelphia County Medical Society was also heard in reply.

Upon the conclusion of the addresses of the appellant and appellees, the Board of Censors unanimously adopted the following resolution:

Resolved, "That the action of the Philadelphia County Medical Society be confirmed."

And in accordance with the provisions of the Constitution, in reference to the duties of its Censors, the Board of the 1st and 2d Districts respectfully submit this report of their action, in the case of this appeal.

Signed, J. B. Biddle,
Hiram Corson,
Edward Wallace.

29th May, 1856.

Dr. F. G. Smith presented and read the Report of the Committee of Publication, to wit:

The Committee of Publication respectfully report, that 750 copies of Vol. V. of the *Transactions* were printed and distributed in proportion to the representation of the various County Medical Societies, at an aggregate expense of $250 64, full details of which will be found in the Treasurer's report.

There are now in possession of the Society the following numbers of each volume:

Vol. I., 2 copies; Vol. II., 32 copies; Vol. III., 30 copies; Vol. IV., 26 copies; Vol. V., 20 copies.

But two complete sets are now in the possession of the Society. These, the Committee recommend, should be retained and bound for the use of the Society.

A complete index to all the volumes published having been appended to the last No. of the *Transactions*, the Committee think that this is the proper time to suggest an alteration in the mode of publication,

based upon the fact that the amount of matter contributed annually is not enough to form a volume of sufficient size to be bound separately. They beg, therefore, respectfully to propose the following resolution :

Resolved, That the Committee of Publication be instructed to issue the *Transactions* hereafter *in parts*, to be paged continuously ; and that when as many are issued as will form a volume of about 500 pages, that an index and title be appended to the last part.

As no provision has been made by the Constitution for the organization of the Committee of Publication, your present Committee further recommend the adoption of the following resolution :

Resolved, That hereafter, the Committee of Nomination be instructed to propose one of the Committee of Publication, who shall act as Chairman, and who shall be a resident of the place at which the *Transactions* are to be published.

All of which is respectfully submitted.

FRANCIS G. SMITH, *Chairman.*

On motion, the report was accepted and the resolutions thereunto appended were adopted.

The Committee to Audit the Treasurer's account report having examined the vouchers and found the account correct.

On motion, it was resolved, that the reports of the Treasurer and of the Auditing Committee be accepted, and the Committee discharged.

Robert P. Thomas, Treasurer, in Account with the Medical Society of the State of Pennsylvania.

DR.

1855.

June 1st. To balance received from Dr. West, former Treasurer, . 32 00

1856.

May 28. For contributions received from the Medical Societies of the following Counties, viz. :

For 1854.

Alleghany	19 00	
Bradford	7 00	
Cambria	12 00	
Lebanon	12 00	
Perry	8 00	
Susquehanna	8 00	
		66 00

And for 1855.

Alleghany . .	15 00	Huntingdon . .	15 00	
Berks . .	20 00	Lancaster . .	37 50	
Blair . .	8 00	Lebanon . .	8 00	
Bradford . .	8 00	Montgomery . .	17 50	
Bucks . .	10 00	Northampton . .	12 50	
Cambria . .	12 00	Schuylkill . .	17 50	
Chester . .	25 00	Philadelphia . .	81 00	
Delaware . .	10 00	Washington . .	10 00	
				300 00
				$398 00

May 28. To Cash balance $30 43

Cr.

1855.			
June 1.	By cash paid T. K. & P. G. Collins, balance for printing the *Transactions* of 1854	87	32
1856.			
Jan. 16.	By cash paid T. K. & P. G. Collins, for printing the *Transactions* of 1855	250	64
" "	cash paid Messrs. Collins for printing circulars for the Corresponding Secretary	6	00
May 26.	" cash paid T. H. Yardley, Corresponding Secretary, for envelopes and postages paid by him . . .	6	50
" "	Treasurer's bill for postages	2	25
" 27.	" A. L. Kennedy, Secretary, for advertising meetings, postages, and printing blank forms	14	86
" 28.	" Balance forward	30	43
		$398	00

E. E. Philadelphia, May 28th, 1856.

ROBERT P. THOMAS, *Treasurer.*

The Medical Societies of Erie, Lycoming, Mercer and York Counties, reported by my predecessor last year as being delinquent for 1853 and previous years, still remain in arrears. In consequence of this, no copies of the *Transactions* have been forwarded to those Counties.

I have the pleasure to report that all the contributions for 1854 have been paid up.

For 1855, those of Franklin, Lehigh, Mifflin, Perry and Susquehanna County Societies, amounting in all to $37 50, remain unpaid, but these will probably be liquidated in a short time.

The Society is now entirely out of debt, and from the foregoing statement, it will be seen there are $30·43 in the Treasury subject to its order.

Robert P. Thomas, *Treasurer.*

An abstract of the report of the Chester County Medical Society was presented and read, and, on motion, the report was referred to the Committee of Publication.

An abstract of the report of the Montgomery County Medical Society was presented and read, and, on motion, the report was referred to the Committee of Publication.

An abstract of the report of the Philadelphia County Medical Society was presented and read, and, on motion, the report was referred to the Committee on Publication.

On motion of Dr. J. L. Atlee, Resolved, that a committe of five be appointed from the Philadelphia County Delegation, to memorialize the city authorities on the subject of Vaccination; which motion, after a brief discussion, in which Drs. Atlee, Bell and Condie participated, was agreed to, and the following gentlemen were constituted the Committee: Drs. Jno. Bell, B. H. Coates, H. Hartshorne, Wm. Mayburry and J. Remington.

On motion of Dr. Bell, Dr. Condie was added to the Committee. The Committee appointed this morning, on the communication from

the Mutual Life Insurance Company, presented the following report, which was, on motion, accepted, and the Committee discharged:—

Your Committee, having carefully considered the several propositions submitted to this Society for information in respect to the vital statistics of the State of Pennsylvania, and certain points bearing upon the value of life within our bounds, beg leave to report that they place a high estimate upon the importance of the subjects embraced in the propositions alluded to, and their faithful solution. As, however, it is scarcely to be expected that any committee appointed by this Society would be willing or able to devote the labor and time necessary to prepare satisfactory answers to the four propositions contained in the communication of the New York Insurance Company; your Committee would therefore suggest that, provided said insurance company appoint, in this State, a Commission to collect the various materials essential to a solution of the propositions on which information is requested, it would not be improper, and would, perhaps, be advisable, that this Society should appoint a Committee to assist, as far as possible, the said Commission in the performance of their duties.

T. F. Betton,
D. F. Condie.

The report of the Medical Society of the City of Reading and County of Berks was presented and read, and, on motion, referred to the Committee of Publication.

On motion of Dr. J. L. Atlee, Dr. Isaac McKinney, a member of the Lycoming County Medical Society, and now present, was received as a Delegate from that Society.

Dr. T. H. Yardley, Corresponding Secretary, presented the following ing report, which was read, and, on motion, accepted:—

"The Corresponding Secretary of the Pennsylvania State Medical Society reports that, agreeably to a resolution adopted at the last meeting of the Society, he "addressed a circular to the prominent physicians in those portions of the State in which no County Medical Society exists, urging upon them the importance of organizing such society without delay.

Of the sixty-three counties in the State, only twenty-four have ever given evidence of the existence of a County Medical Society, leaving thirty-nine in which it is presumed no such organization exists. These circulars were sent in numbers varying from two to thirty to each county.

Much difficulty was found in ascertaining the name and address of physicians in many parts of the country, and many very estimable gentlemen may have escaped attention; I am under great obligations to Professor Gilbert, of the Pennsylvania Medical College, and Professor Rand, of the Philadelphia Medical College, both of whom furnished a list of names.

Dr. Hays, Editor of the *Medical News*, and Dr. Hollingsworth, Editor of the *Medical Examiner*, also greatly aided in giving publicity to the circular, by inserting it in their respective journals.

Communications have been received from thirteen counties, viz.:

Beaver, Butler, ~~Clarion~~, Dauphin, Elk, Fayette, Greene, Lawrence, Tioga, Union, Venango, Wayne and Westmoreland.

All the writers express a desire to organize a Society in their county, and to all of them a copy of the *Transactions* of the last year was sent, to aid them in their efforts.

It is obvious, from the remarks of these correspondents, that the great barrier to the organization of County Societies, in many parts of the State, is Sec. 2d, Article 6, of the Constitution of the State Society, which says—'no one shall be admitted as a member of a County Society, unless he is either a graduate in medicine of some respectable medical school, or has a license to practice from some board recognized by the State Society, or has been a practitioner for at least fifteen years.' Several allude to this; and one gentleman writes—'this rule will exclude some of the most talented and best educated physicians in our county. Some of them have been my students; and though I am a graduate, and have been more than fifteen years in practice, yet I would not be willing to join a Society which must exclude those deserving young men.' 'These gentlemen, after graduating in literary colleges, attended one course of medical lectures, and then commenced practice, intending to attend another course, and graduate at their earliest convenience; but they soon became so situated as to render it impossible to leave their practice and home long enough to accomplish that object.'

TH. H. YARDLEY,
Cor. Sec. State Med. Society.

N. B. I have received the Constitution of the Medical Society of Beaver County, approved by the Censors of that district.

T. H. Y."

Dr. H. Carpenter in behalf of the Committee on Vaccination and Vaccine Virus, stated that circumstances had prevented the Chairman of the Committee from preparing their report, as well as from being present at this session of the Society.

Dr. Remington moved that the Committee be discharged, and a new committee appointed, which motion prevailed; and Drs. H. Carpenter, G. Emerson, and C. W. Parish, were constituted the committee.

Dr. Condie, in behalf of the Committee on Quack Medicines, prosented and read the following report, which was accepted, the Committee discharged, and the resolution appended to the report was adopted.

"*To the Medical Society of the State of Pennsylvania:*

To the undersigned, a Committee appointed at the last annual session of this Society, was referred the entire subject involved in a resolution offered by Dr. Carpenter, of Schuylkill County, in the following words, namely: 'That the members of this Society, and the profession generally, be strongly advised to use their influence with apothecaries and druggists to induce them to discontinue the purchase and sale of patent and quack medicines, and that the profession be recommended to furnish their patronage to those only who comply with this request;' and, also, an amendment proposed to said resolution by Dr. John Neill, of Phila-

delphia, by adding after the words 'quack medicines,' the words, 'and patented instruments.'

Whether, in referring to your committee the whole subject connected with this resolution, and the proposed amendment, it was intended that they should simply report their views as to the policy of the adoption by the Society of the first, with or without the latter, or whether it was expected that they should enter into an examination of the entire question as to the propriety of the use of and traffic in patent and quack medicines, and patented instruments, and the duty of this society, and of the medical profession generally, to use their influence to put a stop to the traffic by apothecaries and druggists, and the propriety of physicians withholding their patronage from such as shall persist in it, does not very clearly appear from the terms of the resolution under which your committee was appointed.

The question, in all its bearings, is one, unquestionably, of considerable interest. That the use of and traffic in patented and quack medicines and nostrums, is at once improper and dishonorable, is, we believe, the universally received opinion of the medical profession. It is so pronounced by the Code of Ethics, adopted by the American Medical Association, and accepted by every State Medical Society throughout our Union; while the Society of our own State, to exhibit in the strongest light its disapproval of the use of and traffic in these medicines, has, by its constitution, excluded from affiliation with it every county society that admits to membership any one who sells or deals in them, or in any way encourages their employment.

With this open and formal denunciation, on the part of the medical profession, by the mouth of its recognized representatives, the duty of its members to discountenance the traffic in patent and quack medicines and nostrums on the part of apothecaries and druggists, and to exert every honorable means within their power to induce them to relinquish it, must be apparent. And so soon as apothecary stores, conducted by competent and skilful pharmaceutists, shall be established in the different sections of our larger cities and inland towns and villages, from which all patented remedies, quack remedies, and nostrums of every description are excluded, it will become the duty, as well as the policy of physicians, to confine their patronage exclusively to them. But whether, before the establishment of stores of this character, it would be wise or prudent to refuse sending a prescription to an apothecary merely from the fact that objectionable articles are kept for sale by him will, perhaps, be questioned. A physician engaged in extensive practice, and, at the same time, desirous of devoting as many hours to study as will enable him to keep up steadily with the onward progress of his profession, cannot, with justice to himself and to his patients, dispense with the services of the pharmaceutist for the compounding of his prescriptions. The separation of the duties of the apothecary from those of the medical practitioner is attended with advantages which only imperative necessity should be allowed to sacrifice. By a general and unwavering concert of action among the members of the medical profession, there would be no difficulty of excluding every objectionable

article from the shelves of the druggist and apothecary, but until such a concert of action can be obtained, your committee believe it would be impolitic to advise the physician to dispense with the services of an otherwise skilful and reliable pharmaceutist because he keeps patented medicines for sale, when the services of no other is to be obtained against whom the same objection does not apply.

While there is an almost unanimous agreement among the members of our profession as to the impropriety of physicians prescribing, or apothecaries dealing in patented medicines or nostrums, there still are some who boldly advocate not only the propriety of physicians employing patented instruments, but of being themselves the proprietors of them, and who, of course, approve of the traffic in them by the apothecary.

It is no more than just, they argue, that he who invents a useful instrument or apparatus, should have secured to him the reward of his ingenuity and skill. But, if it be just in reference to an instrument or apparatus, why is it not equally so in reference to the discovery of any new remedial agent, or of some admirable combination of the medicines in common use? Does the invention of the first evince more genius, a higher degree of professional knowledge, or closer and more profound habits of observation, than the discovery of the last? The fact is, that not a single argument has been adduced to prove the propriety of the interposition of a patented right to prevent the free enjoyment of the one, that does not equally prove the same thing in reference to the other.

Far be it from us to withhold the reward which is justly due, whether from him who increases the value and efficiency of the materia medica, or from the one who makes a valuable addition to the armamentarium chirurgicum; we should certainly, however, not agree that the just reward due to either is a right to derive a pecuniary profit by taxing such of his professional brethren as would desire to avail themselves of the discovery or invention for the relief of those suffering from the effects of an accident, or from disease, with the power to forbid its use by such as are unwilling to pay the tax.

Your committee would desire that a higher and more enduring reward should be conferred, one more in accordance with the high-minded, honorable, and unselfish principles which should ever characterize the legitimate practitioner of the healing art, and a reward that no one who has succeeded in augmenting the remedial and curative resources of his profession can fail to receive.

We deny the right of a physician or surgeon, by any means, legal or other, to prevent or curtail the free enjoyment, by his professional brethren, of whatever discovery or improvement he may have the good fortune to make in the means adapted to relieve or remedy the accidents or diseases to which the human frame is liable. The claims of humanity, and the duties he owes to his profession, alike forbid him to monopolize or conceal the results of his observation, knowledge, or skill. He is bound, by his responsibilities as a man, and as a practitioner of a liberal art, to freely communicate these results, that, in the hands of

others, they may become, perchance, the means of a still higher and more important advance in medical or chirurgical knowledge and practice.

They who claim the right to secure to themselves, by the interposition of a patent right, a pecuniary recompense from the profession for their inventions and discoveries, forget that they were themselves indebted to the profession, in the first instance, for the very knowledge by the application of which they have been enabled to improve or increase the therapeutic or surgical means for carrying out the great objects of the healing art. They lose sight of the fact that they have been allowed to avail themselves freely of the rich fund of medical and surgical knowledge that has been accumulated by the joint labors of the most distinguished practitioners of all ages, and of all countries; and that this privilege is enjoyed by them only on the implied condition that, on their part, they will as freely contribute the results of their skill and industry, to still further extend and enrich the common fund by which they have been so largely benefitted.

But, even could it be shown to be right and proper for medical men to employ and deal in patented instruments, still the question remains as to the propriety of encouraging, or countenancing the indiscriminate sale of these instruments by apothecaries.

If the latter were restricted to the dispensation of their wares only on the order or prescription of a physician, the keeping in their stores patented instruments would, so far as the apothecaries alone are concerned, be a matter of very little moment. But, as they feel themselves at liberty to keep for sale anything and everything upon which they can make a profit, and to vend their heterogeneous wares to whomsoever they can induce to become purchasers, and to employ all the usual means to augment the number of their customers, there is a danger that, when patented instruments form a part of the stock in trade of the apothecary, they, as is the case with the entire list of patent medicines and nostrums, will be procured and applied by those who are totally incompetent to decide upon the cases to which the respective instruments are adapted, or the manner in which they are to be adjusted, in order that the object they are intended to effect shall be best secured. And there is the more danger of this, from the fact that these instruments are always widely advertised, and their infallibility boldly proclaimed through the public papers; and, still further to encourage their popular use, each instrument is usually accompanied by printed directions for its application by unprofessional purchasers. Besides all this, the apothecary commonly feels himself warranted, however small may be his modicum of surgical knowledge and skill, to recommend these instruments in cases to which he deems them applicable, or even himself to superinted their application.

We are acquainted with instances, and similar ones must have fallen under the notice of other physicians, in which individuals affected with hernia, with uterine displacement, or with spinal deformity, or who have supposed themselves to be so affected, have, upon the faith of a newspaper advertisement, or the recommendation of an apothecary, purchased a patented instrument, supposed to be adapted to remedy their particu

lar ailment, from the use of which they have experienced an increase of suffering, and even serious permanent injury. These occurrences cannot be avoided so long as patented instruments are kept for sale, to whoever may desire to purchase them, in the shop of the apothecary.

Your Committee are, therefore, convinced that under no circumstances whatever can it be proper to countenance the sale of these instruments by apothecaries and druggists, and they would recommend the adoption, by the Society, of the following resolution:—

Resolved, That the members of the Medical Society of the State of Pennsylvania, and the profession generally, be recommended to use their influence with the druggists and apothecaries of their respective neighborhoods, to induce them to discontinue the purchase and sale of patent and quack medicines, and patented instruments; and that physicians be recommended to withhold, as far as practicable, their patronage from such apothecaries and druggists as persist in the sale of the articles indicated.

D. Francis Condie.
Jas. S. Carpenter.
Sept. A. Ogier.

Philadelphia, May 26, 1856.

Dr. Jos. Carson, in behalf of the Committee on Resolutions of the Berks Co. Society on the Adulteration of Drugs, asked leave to be continued, which request was, on motion, granted.

Dr. Wister, in behalf of the Committee to nominate officers of the Society for the ensuing year, reported the following nominations:—

President,—R. La Roche, Philadelphia County.

Vice-Presidents,—Wilmer Worthington, Chester County; Samuel Jackson, Philadelphia; Oliver Cunningham, Beaver; George F. Horton, Bradford.

Recording Secretaries,—Alfred L. Kennedy, Philadelphia County; Septimus A. Ogier, Chester.

Corresponding Secretary,—Thomas H. Yardley, Philadelphia County.

Treasurer,—Robert P. Thomas, Philadelphia County.

Censors—First and Second Districts,—J. B. Biddle, Philadelphia County; John L. Atlee, Sr., Lancaster; W. Isaac Thomas, Chester; Hiram Corson, Montgomery; Chas. Marten, Lebanon; R. E. James, Northampton; G. F. Horton, Bradford; Edward Wallace, Berks.

Censors—Third and Fourth Districts.—Jos. A. Landis, Blair County; J. B. Luden, Huntingdon; Luke Granger, Tioga; Thomas Wood, Lycoming; Jos. Henderson, Mifflin; J. H. Case, Perry.

Censors—Fifth and Sixth Districts.—J. W. Wishart, Washington County; Oliver Cunningham, Beaver; D. Leasure, Lawrence; Jno. T. Ray, Mercer; C. F. Perkins, Erie.

Delegates to the American Medical Association.—J. S. Carpenter, Schuylkill County; Robert B. Davidson, Washington; Thos. F. Betton, Philadelphia; H. K. Neff, Huntingdon; J. A. Ehler, Lancaster; Jno. Shrack, Montgomery; Edward Wallace, Berks; D. K. Shoemaker, Carbon; C. F. Schneck, Lebanon; Manly Emanuel, Delaware; Philip H. Grier, Bucks; David E. Marquis, Beaver.

Additional members of the Committee of Publication, Francis G. Smith, Saml. Lewis, T. Hewson Bache.

The Committee also reported that they had selected West Chester as the place of meeting in 1857.

On motion, the report was laid on the table until to-morrow.

Dr. Condie presented and read the following report and resolutions on the death of Dr. J. P. Heister, which were, on motion, adopted and the Committee discharged.

Whereas the Pennsylvania State Medical Society feels it to be a duty which it owes to itself, to the profession, and to the families of such of its members as may be removed from it by death, and at the same time, a mournful privilege, the exercise of which it would not willingly relinquish, to place on permanent record the expression of its estimate of the worth of the departed, and of the loss it has sustained in their demise; therefore be it

Resolved, That in inscribing upon the list of its deceased members the name of Dr. J. P. Heister, it was with a deep sense of the severe deprivation it had experienced in common with the medical profession of Berks County and the entire State. Exemplary in all his relations as a citizen, and a Christian; well instructed as a physician, and, as such, faithful in the discharge of his professional and ethical duties, and ever ready to promote the extension of medical knowledge and the elevation of the character and standing of the profession throughout our State and country; as a member of this Society, faithful and zealous in the discharge of his obligations, and as its presiding officer dignified and impartial in the discharge of its functions; the deceased, while living, commanded the esteem of his fellow members, by whom his memory will be ever cherished with profound respect.

Resolved, that this Society have deeply commiserated with the family and friends of the deceased in their bereavement, and most heartily join with his professional brethren of the County of Berks in the testimonial of regard for his memory.

D. Francis Condie,
J. H. Seltzer.

Dr. A. Heger offered the following resolutions:—

Resolved, That a standing Committee of five, of which the present Committee on Forms shall be three, be appointed, whose duty it shall be to take charge of the department of Meteorology; give the necessary directions to observers; organise a proper system of observations throughout the county societies, and report yearly to the Association.

Resolved, That each county society be and is hereby requested to appoint a similar committee, consisting of one or more observers, as the topographical formation of each county may call for; to make such observations as the above Committee may direct, or they may deem proper; and to report yearly on or before the 1st Monday in March to the chairman of the Committee of this Society.

On motion of Dr. Kennedy the resolutions were adopted, and Drs. Heger and Wythes appointed the additional members of the Committee on Forms under the resolution.

In the absence of Dr. Gemmil, Chairman of Committee on the Extension of County Organizations, Dr. J. B. Biddle reported that the Committee had discharged the duty assigned to them by preparing and circulating an appeal in behalf of such organization among the members of the profession in those counties of the State in which no societies existed. On motion that the Committee be discharged, it was so ordered.

Dr. G. Emerson submitted the following resolutions :—

Resolved, That a committee be appointed to procure a supply of vaccine matter fresh from the original source, or recently obtained, for the purpose of distribution among the members of the several county societies of the State.

Resolved, That the said Committee be authorised to charge for the virus so distributed such an amount as will cover any expense incurred in procuring and distributing the virus.

On these resolutions a most able and interesting discussion ensued and was continued until the hour of adjournment, by Drs. Emerson and Condie and Wishart, Prof. Jackson and Drs. Gries and Bell.

Adjourned until to-morrow at 9 o'clock.

Friday Morning, May 30, 1856.

The Society met, pursuant to adjournment, at 9 o'clock. Dr. J. S. Carpenter, President, in the chair. Present thirty-seven members.

The minutes of yesterday's session were read and approved.

A communication was received from Dr. A. E. Stocker, Recording Secretary of the Philadelphia County Medical Society, enclosing a list of the officers and members, and certifying that Drs. J. C. Morgan, and S. S. Brooks, had been disfellowshipped by that Society.

Dr. Worthington called up the subject of Vital Statistics, reported upon yesterday, and urged the propriety of the Society's acting at once on the suggestion contained in the report, viz: That a committee be appointed to confer with the Mutual Life Insurance Company, N. Y., or its agent.

A discussion ensued on the general subject of Vital Statistics, in which Drs. Worthington, Condie, Jewell, Kennedy, Wythes, and Stocker participated; by all of whom the importance of the thorough and systematic collection of reliable sanitary data was fully recognized; the speakers differing, however, as to the means to be pursued in obtaining those data, and especially as to the propriety of appointing a committee to confer with the company aforesaid. The question was disposed of by the adoption of the following resolution, proposed by Dr. Worthington:—

Resolved, That a committee be appointed to confer with Life Insurance Companies, or other public bodies, or with any committee which they may appoint, on the subject of Vital Statistics.

Drs. Worthington, Condie, and H. Carpenter, compose the committee under the resolution.

The following report and resolution, on the descease of Drs. C. O.

Richards and E. S. Baer, of Lancaster County, were submitted by Dr. H. Carpenter, and on motion adopted:—

The members of the Medical Society of the State of Pennsylvania, having adopted the very appropriate and laudable rule of placing permanently upon its records such testimonials as may be submitted, commemorative of the worth of its deceased members, the undersigned committee, appointed to present resolutions expressive of the feelings of the Society upon the loss they have sustained in the decease of Drs. C. O. Richards and E. S. Baer, of Lancaster County, submit the following:—

The deceased were both active, intelligent, and successful physicians; enjoying in a large degree the confidence and esteem of the community in which they lived; they were removed from the sphere of their labors while yet in the vigor of youth and heighth of usefulness; and, from their ability and skill in their profession, their exemplary character as citizens, and their many amiable and endearing qualities as companions and friends, their decease will leave a void that will long be felt by their numerous friends and acquaintances; therefore—

Resolved, That this Society have heard, with unfeigned regret, of the death of their late fellow members—Drs. Richards and Baer; and while they deeply deplore this dispensation of an allwise Providence, they will ever hold in lively remembrance their many virtues, and sincerely tender to their families and friends their heartfelt condolence and sympathy, in their melancholy bereavement.

Signed, HENRY CARPENTER,
G. M. GEMMILL.

Dr. H. Hartshorne presented the following preamble and resolutions:—

Whereas, the annual reports to this body, of the County Medical Societies, notwithstanding their ability and value, contain, on account of the paucity of the members contributing to them, only a partial account of the sanitary experience of the year; and whereas system and convenience in the method of reporting may facilitate the obtaining of more complete returns, therefore—

Resolved, That a committee of three be appointed by the President, to report upon the practicability of issuing a *form of record*, sanctioned by the Society, for the purpose of obtaining uniform returns from the members of the different County Medical Societies, in regard to the *amount of disease* occurring under their care: and that the same committee report also upon the propriety of passing the following resolutions:—

Resolved, That this Society recommend to the different County Medical Societies of the State, the adoption of a uniform method of recording and reporting the amount of disease, as well as of mortality, occurring within their limits each year.

Resolved, That it be recommended to the several County Medical Societies, to make it one condition of the eligibility of any member as delegate to the State Medical Society, that he shall have furnished an abstract, or summary, of the principal diseases occurring under his care,

to the appropriate committee of the county in which he resides, for the year preceding, or a reason for not having so done.

Resolved, That no member of this Society shall, hereafter, be eligible as delegate from it to the American Medical Association, who has not furnished some account of the principal diseases passing under his treatment during the year, to the appropriate committee of his County Medical Society, unless a sufficient reason be afforded for the omission in each case.

Resolved, That in the sanitary reports of the different County Medical Societies, the committees be requested to mention, hereafter, the names of all those members who have contributed to their materials.

On motion of Dr. Jewell, the preamble and resolutions were adopted, and Drs. H. Hartshorne, Jewell, and Wythes were appointed the Committee.

Dr. Stocker moved to amend Art. VI, Section 6, of the Constitution, so as to read as follows (the amending clause being in italics):—

Any member of a County Society who is censured or expelled shall have a right to appeal to the Censors of the district, *provided the said appeal be filed within three months after the date of said act of censure or expulsion.*

Which amendment was unanimously agreed to.

The following preamble and resolutions were offered by Dr. R. P. Thomas, and, on motion of Dr. J. L. Atlee, the consideration of them was postponed until the next annual session of the Society:—

Whereas, the frequent meetings of the American Medical Association are attended with much inconvenience and expense to the members, and, from the limited time afforded to the chairmen of committees having special subjects under consideration, their reports must necessarily be limited or imperfect; therefore,

Resolved, That in the opinion of this Society, the advancement of the best interests of the profession, and the better development of the history and treatment of diseases, as modified by local peculiarities, will be enhanced by the adoption of a longer interval in the meetings of the American Medical Association.

Resolved, That the delegates from this Society to the American Medical Association, be requested to bring the subject before the next annual meeting of that body, and recommend the substitution of triennial for annual sessions.

Dr. G. B. Hotchkin offered a series of resolutions calling for the publication of a condensed history of the Society, from its origin to the present time, with the Constitution, Code of Ethics, and the various resolutions now in force; the said history to be revised once in five years. The resolutions were, on motion, laid on the table.

Dr. A. K. Gaston presented the report of the Committee on the Resolutions of the Chester County Society (see printed *Transactions*, vol. IV., p. 17). On motion that the report be printed, and its consideration postponed until the next annual session of the Society, which was agreed to.

The resolutions on Vaccination and Vaccine Matter, offered yesterday

by Dr. Emerson, were called up by Dr. Worthington, and on his motion agreed to.

The report made yesterday by the Committee on Nomination, was read, on call; and on motion of Dr. Condie it was—

Resolved, That the officers therein named be, and they are hereby declared to be the officers of the Society for the ensuing year.

The President elect, Dr. R. La Roche, upon taking his seat, addressed the Society as follows:—

GENTLEMEN OF THE STATE MEDICAL SOCIETY:

In assuming the duties of the office to which you have this day elevated me, I would do injustice to my feelings, were I to fail to express to you my most sincere thanks for the honor thus conferred on me. It is an honor to which I feel I can lay no claim, and which I must owe rather to the partiality of friends than to any merit of mine. Certainly the announcement of your choice was to me most unexpected. Little did I dream that I was ever to be chosen to preside over your deliberations. The duties of the office are among those for which I think myself least qualified, from habit and taste, as well as from want of experience, to perform in a satisfactory manner. I therefore at once appeal to your indulgence; for, without a large share of that virtue, you will, I fear, have many an occasion to regret not having made another selection. But on this subject you have assumed the responsibility. All I can promise is that no effort will be neglected by me, to discharge the duties you have been kind enough to confide to me, to the full extent of my abilities, and with the zeal which the warm interest which I have ever taken in the success of this Society, and in the honor and high standing of our profession, animate me.

On motion of Dr. Condie, the selection of West Chester as the place of meeting in 1857 was approved, and 11 o'clock, A. M., on the last Wednesday in May next, was fixed as the hour at which the next session shall be opened.

On motion of Dr. H. Carpenter, the President was requested to deliver an address at the opening of the next session.

On motion of Dr. Condie, it was—

Resolved, That the thanks of the Society be tendered to the retiring President, Dr. Jas. S. Carpenter, for the courteous and impartial manner in which he has presided over the deliberations of the session.

On motion of Dr. Bell, the thanks of the Society were tendered to the other officers of their prompt and efficient discharge of duty.

The following resolutions, proposed by Dr. Wythes, and committed in 1854, and recommended for adoption in 1855, but accidentally overlooked, were, on call of Dr. Kennedy, taken up, and on his motion agreed to:—

Resolved, 1. That the several County Medical Societies are recommended to appoint their annual committees, to prepare reports as early as practicable after the meetings of the State Society, and that said committees subdivide themselves respectively into sections, having refer-

ence to the different topics of Medical information, namely: pathology and therepeutics, surgery, midwifery, etc.

Resolved, 2. Papers read before a county Society should be referred to the appropriate section of the committee, to be used in the preparation of the annual report. Papers of more than ordinary merit or interest, to be reported at length, or an abstract made of them, at the option of the Society.

On motion of Dr. Gries, it was—

Resolved, That the thanks of the State Medical Society are hereby presented to the Board of Trustees of the University of Pennsylvania, for their liberality in granting the use of the Hall of the University for its meeting during the present session.

On motion of Dr. H. Carpenter, it was—

Resolved, That the thanks of the Society be, and they are hereby tendered to the Philadelphia Press, for their faithful report of each day's proceedings, to the Pennsylvania Institute for the Instruction of the Blind, to the Trustees of the University of Pennsylvania, to the Academy of Natural Science, to Wm. H. Allen, LL. D., President of Girard College for Orphans, to the Philadelphia Hospital for Diseases of the Chest, and others, for the kind invitation extended by them to the Society, to visit their respective institutions.

On motion of Dr. Emanuel, it was—

Resolved, That the thanks of this Society be tendered to the Committee of Arrangement, for the handsome manner in which they have been received and entertained during their attendance at this session.

On motion of Dr. Wister, the Society adjourned.

HENRY CARPENTER,
ALFRED L. KENNEDY,
Recording Secretaries.

BIBLIOGRAPHICAL NOTICES.

The Medical Profession in Ancient Times. An Anniversary Discourse delivered before the New York Academy of Medicine, November 7, 1855. By JOHN WATSON, M. D., Surgeon to the New York Hospital. (*Published by order of the Academy.*) New York: Printed for the Academy by Baker & Godwin. 1856.

We are indebted to the politeness of the accomplished and learned author for a copy of the above Discourse, delivered last year before the New York Academy of Medicine. The work consists of thirteen chapters, in twelve of which the condition of Medicine is gradually traced from the earliest period in which

it existed in organized communities down to the Latin and Greek Medical writers, subsequent to Galen; the thirteenth chapter containing an interesting account of the laws and customs of the Roman Empire in relation to our profession. "Though small," says the author, "the work is the result of no inconsiderable research; much of which might have been spared, had I been disposed to rely simply on the historians. But as my investigations were undertaken for my own gratification, I have, as far as leisure and opportunity would permit, drawn the facts and opinions here embodied, from the earliest authorities."

We need hardly observe that it is the duty of every physician to know somewhat of the past history of his science. To possess some information regarding the successive phases through which it has passed, some acquaintance with the history of its master-minds and their various doctrines, must be allowed by every one, we think, to be a proper and graceful, if not an essential component of the education of every member of the profession. How seldom, however, do we find such studies cultivated in the present day, even by physicians who have been liberally educated! This ungrateful and unwise neglect of the past is a marked feature of the present generation, which is too apt to regard whatever is antiquated as unprofitable and beneath the dignity of its notice—

> "And only wish
> As duteous sons, their fathers were more wise."

In speaking highly of such studies, however, we do not wish to be understood as upholding the view that the medical opinions of the ancients are proper guides to us either in the recognition or treatment of disease. The ardent spirit of investigation which characterises the present age has nowhere been more strongly shown than in the improvements it has imparted to our own science, and there is no reason to doubt that even the most learned and accomplished of the ancients, in his knowledge of medicine, was far beneath the humblest practitioner of the present day. The benefits of such studies lie in other directions; they constitute an excellent training and discipline of the intellect, and by their antagonism to that narrowness of mind which so frequently follows a complete devotion to any one special pursuit, their influence will be found to be both

liberalizing and strengthening. They are the sources, also, of much happiness to those who possess a taste for them. "It is pleasant," as Dr. Watson remarks, "as well as profitable to turn, on fit occasions, from the bustle of active life, to the study of the past,—to the origin of our art, to the principles and necessities that called it into being, to the struggles of our ancestry. We are thereby better able to understand our position, to know how far we have advanced, to whom we owe our progress, the labor still before us, and the places we ourselves are likely to occupy in the estimation of those who are to follow us."

It cannot be denied that much of the respect which is paid us by the public is due to the presumption that we belong to a learned profession. The public, however, does not regard acquirements, great though they may be, in our own special department, as learning. As we have been educated to be physicians, it is naturally expected of us that we should understand the practice of our own science, just as it is expected of one who is brought up to a trade, that he should understand his trade. Something else is required to secure and sustain for us the reputation of being learned. It is gratifying, to find by such works as the one before us that there are still among us gentlemen, actively employed, too, in ministering to the infirmities of their fellow beings, who can fully uphold our reputation in this respect. We hail the appearance of such works as the 'Discourse,' therefore, with the greatest pleasure. That devotion to the *humanities*, as they are significantly called, is not incompatible, also, with the exercise of more urgent duties, is fully proven in the present instance, and we could add to it, were it necessary, the names of other gentlemen who are among the foremost practitioners of our profession.

As a specimen of the work we extract the following from the third chapter on the Asclepiadæ.

"As a rational study, so long as medicine was taught orally, or by tradition and example only, the acquirements of its votaries could not have been extensive. Their main study in the management of acute diseases, was in regulating the regimen. Epidemic diseases they looked upon as divine dispensations, with which they did not dare to interfere. A knowledge of the general rules of health, and the influence of diet, exercise, climate, and locality, attracted much of their attention. In the management of injuries and external diseases, they were but little inferior to their descendants of modern times. Their medical agents

were the lancet, of which they made frequent use; certain active cathartics, emetics, and diuretics; cataplasms, unguents, escharotics; and mechanical instruments and appliances. Of anatomy and physiology their knowledge was limited; and as for chronic diseases, up to the time of Herodicus of Selymbria, who is said to have been one of the teachers of Hippocrates, they did not venture to interfere with them.

"This Herodicus had been a teacher of youth, and being always in delicate health, he had prolonged his life by systematic exercises and a regulated diet. The treatment which he had found useful in his own case, he recommended to others; and thus he turned the attention of medical men to a course of practice, and a group of diseases, which they had hitherto disregarded. His innovations were for a time unpopular; and even Plato undertakes to upbraid him for them, declaring 'that no attempt should be made to cure a thoroughly diseased system, and so to afford a long and miserable life to the man himself, as well as to his descendants. For Æsculapius,' he continues, 'did not think a man ought to be cured who could not live in the ordinary course, as in this case he would be of no service to himself or to the state.' He goes on to deplore the necessity of using the terms then recently invented for designating chronic diseases:—'Dropsies, and Catarrhs! Do not you think these abominable? Truly these are very strange names of diseases; such, I think, as existed not in the days of Æsculapius.' But though not in the habit of treating chronic internal ailments, the profession were at least supposed to be accquinted with them, so far as to be able to detect them, and pronounce correctly in regard to them, in the inspection of slaves. Even Plato would hold the physician responsible for his opinion in such cases, the object of the philosopher being to guard against dishonesty in the sale or transfer of slaves from one master to another.

"With respect, then, to the policy and ethics of the Asclepiadæ, we learn from the Oath and Law, as also from other passages in the Hippocratic code, that the student was formally bound to his master by indentures; that the son of a former master, choosing to enter the profession, received his education gratuitously; that others not thus circumstanced, were expected to pay for their instruction; that the sons of the Asclepiadæ did not necessarily follow their fathers' employment; that those who were employed in the temples, or in practice elsewhere, were therefore, simply a fraternity, in the modern acceptation of that word, and not, as some suppose, an exclusive caste derived from one family; that each practitioner was at liberty to follow his occupation where and when he chose, but for honorable purposes only; and that even at this early day, there were designing men who were 'physicians only in name,' and who gave themselves up to disreputable practices; against whom the regularly initiated had no redress, and no other advantage than that upon which we ourselves rely, a superior education, honesty of purpose, devotion to their duties, and the confidence of a discerning public."

Of Hippocrates, the writer says:

"Many speculations have been afforded, to account for the rapid advancement of medicine in the hands of this great father of the profession. According to Celsus, his principal credit was in removing the teaching of medicine from the school of philosophy, where it had always received some attention, and treating of it apart, as a distinct department of practical knowledge. Pliny, after Varro, supposes that he was the first to institute clinical instruction, '*hanc quæ Clinicæ vocatur*,' that he was led to this after the burning of the temple of Cos, and that the materials of his course were supplied mainly by the votive tablets which had been there accumulating. But his claim to our respect rests on higher ground.

The account of the museum at Alexandria and its occupants is very graphic; we regret that we cannot lay the whole description before our readers:

"But, among the public buildings of the rising capital, that which has the greatest claim upon our attention, and to which the city ultimately owed its fairest frame, was the Museum. This stood in the quarter of the Bruchium, fronting the harbor. Its chief apartment was a great hall, which served as a lecture-room and place of general concourse. Around the main building, on the outside, was a covered walk or portico; and connected with it, was an Exhedra, in which the philosophers sometimes sat in the open air."

"The men of learning in the several faculties of this institution, lived together in a sort of fraternity, eating at a common table, supported in whole or in part at the public expense. Some of them officiated as professors under a fixed salary; some of them as private tutors, deriving at least a portion of their income from their pupils; some of them were engaged in the public works, or in the service of the state; and some, as original investigators in the arts, in literature or philosophy, or in works of fancy, in the exact sciences, in natural history, or in medicine.

"Under Ptolemy Philadelphus, the Museum had already risen to the highest rank among the Greek schools. Its library already held two hundred thousand rolls of papyrus, equal to about ten thousand of our modern printed volumes. At the head of this library, under Ptolemy Soter, its founder, was Demetrius Phalereus, who had formerly been chief-magistrate of Athens. The system of instruction, as at first arranged, was divided among the four faculties of literature, mathematics, astronomy, and medicine; but other faculties, or special departments, must have been early adjoined to these.

"At the head of the mathematical department was Euclid. In that of poetry were Theocritus and Callimachus. The chair of philosophy was assigned to Hegesias of Cyrene, that of astronomy to Timocharis. The department of natural history was under Philostephanus, then engaged in a work on the history of fishes. Manetho, an aboriginal Egyptian, was occupied in preparing an elaborate history of his own country; and Timosthenes, the commander of the fleet, had in charge the subject of geography. In the medical faculty were Cleombrotus of Cos,

Herophilus, and Erasistratus. The first of these was in high repute as a practitioner; was sent to the relief of Antiochus when dangerously ill, and after curing that king, received on his return a present of a hundred talents, about fifteen thousand pounds sterling, as a reward from Philadelphus.

"Ptolemy Soter was himself an author, and the biographer of Alexander. As a man of enlightened understanding and cultivated taste, he took delight in the society of the Museum. He was in daily intercourse with the philosophers, listening to their discourses in the lecture-room, or entertaining them at his own table. At one of these literary dinners he is said to have asked Euclid for a shorter way to the higher mathematics than that by which the pupils were led in the lecture-room; when Euclid, as if to remind him of the royal roads of Persia which ran by the side of the public highways, but were kept clear and free for the king's use,—gave him the well-known reply, that there is no royal road to geometry.

"Among the rhetoricians of the museum was the sophist Diodotus Cronus, with whom Ptolemy was in the habit of jesting, and who among other paradoxes maintained the non-existence of motion,—arguing that motion was neither in the place from which bodies moved, nor in that to which bodies moved, and consequently had no existence. Cronus, however, by a fall, dislocated his shoulder; and when asked by Herophilus, who had been called to assist him, whether the fall had occurred at the place where the shoulder now was, or at that from which it had descended, was by no means contented with the application of his own argument, and begged the physician to begin at once by adjusting the dislocation.

"The seven ablest literary men at the Museum, were called the Pleiades; and they had in charge the business of adjudging prizes and rewards to the pupils. At one of their public sessions, a chair accidentally vacant among them, was, for the moment, assigned to the grammarian Aristophanes. When the reading of the exercises was ended, and most of those present were agreed upon the one deemed best of all the compositions, Aristophanes dissented from the general judgment, and pointed to the very volume in the library from which this performance had been copied. Ptolemy was struck with this test of the grammarian's acquirements, and soon afterwards promoted him to the post of librarian, then the most honorable office of the Museum. The Ptolmies reserved to themselves the right of appointment to office, and occasionally silenced the professors. Hegesias, in the midst of a discourse against the fear of death, was thus silenced, lest by his eloquence he might excite a passion for suicide among his hearers. But, while watching with solicitude over the business of oral instruction, they took no official notice of books. And Hegesias, no longer able to lecture, consoled himself by recording his opinions, and circulating them among his friends.

"At a time when books were expensive and readers few, the influence of private reading could hardly be felt upon the social institutions or political destiny of the nation; and hence it was disregarded. Not so with oral instruction. Among the Greeks this had always been the

common mode of enlightening the people, of amusing them, and of molding their opinions. Most of the poetry, and much of the written history of the nation, were prepared for public recitation. Plato, aware of the influence of such exercises, would have had a censorship upon the poets, that they might not be permitted to recite their compositions in public before submitting them to the judges and guardians of the law, and obtaining their approbation. The busines of lecturing, therefore, was at Alexandria, as in the other cities, of more importance than that of composing for the private reader. The custom of appointing readers for familiarizing the people with Homer and other standard authors, had already been introduced here. And Hegesias, after the loss of his professorial chair, was occupied as the official reader of Herodotus."

We do not know whether the "Discourse" is for sale; if it be, we advise our readers to possess themselves of a copy of it. It is extremely interesting, very well written, and bears ample testimony throughout its pages to the erudition and industry of its author.

Manual of Chemical Physiology. From the German of Prof. C. G. Lehmann, M. D. *Translated with notes and additions by* J. Cheston Morris, M. D. *With an Introductory Essay on Vital Force.* By Samuel Jackson, M. D., Professor of Institutes of Medicine in the University of Pennsylvania. Illustrated with forty wood cuts. Philada.; Blanchard & Lea. 1856.

The above manual is a digest or abridgement of the author's large work on Physiological Chemistry, of which our readers will remember we gave a very full and elaborate notice in the February number. In the present work, Dr. Lehmann has endeavored "to place together, in as compressed a form as possible, the positive facts which can now be looked on as the certain possessions of physiological chemistry, and to bring to bear only those conclusions which carry upon them, according to our present physical views, the stamp of relative truth." In endeavoring to obtain the "compressed brevity" he had in view, the author was obliged to omit much of the matter, principally argumentative, however, of his larger work; and he leaves it to his readers to decide "whether the attempt to present the department of physiological chemistry in a short epitome, when the fixed marks are so few and the deficiencies so innumerable, has succeeded." A good abridgement is always valuable; its value

is of course much greater when prepared by its author, than when done by any other person, as he can best judge how far the work can be reduced without losing its essential characteristics. The merit of the present work is enhanced also, by the fact that it contains the author's latest views, being essentially the same as those which are contained in his last unabridged work, the Sydenham Society translation and its American reprint being, as we have remarked in a former notice, a translation of a previous edition.

It gives us pleasure to state that the text of the author has been admirably rendered into English by the translator, Dr. Morris. The translation in fact is equal in every respect to the one made under the auspices of the Sydenham Society of the author's larger work, and gives evidence throughout of careful elaboration.

"From Dr. Lehmann's views of the forces operative in living organisms, (says Dr. Morris,) I must express my dissent. Dr. Jackson has been kind enough, at my request, to prepare an article on these views, stating the doctrine he has so ably advocated for many years.

"To adapt the work for the use of students of physiology, I have incorporated in the text additional matter (derived mainly from notes on Dr. Jackson's Lectures, Carpenter's Human Physiology, Todd and Bowman's Physiological Anatomy, Kölliker's Microscopic Anatomy, &c.,) of a more purely physiological nature. Short notes have also been added, in the shape of an Appendix, on kindred subjects not treated of by the author; and illustrations selected from various sources have been introduced, instead of referring, as the author has done, to the 'Atlas of Physiological Chemistry, by Otto Funke.' These alterations have so changed the character of the work as to render the title of 'Chemical Physiology' more applicable than that originally given to it of 'Handbook of Physiological Chemistry,' which has, however, been retained for Dr. Lehmann's portion of it."

The following are some of Dr. Jackson's remarks on Dr. Lehmann's doctrine of vital forces:

"The identity of the chemical actions of living beings and of inorganic bodies is now generally admitted. It is granted 'that the same chemical laws preside over the constitution and transformations of different compounds, whether organic or inorganic.' Admitting the accuracy of this proposition, it does not authorize the assertion, that 'all the differences observed between these two different classes of bodies are accidental, relative, and have nothing essential.' Will it be affirmed that, when an unfecundated egg is placed in the conditions for incubation, and the result is its putrefaction, while, in a fecundated egg, the albuminoid contents are transformed into blood, muscles, viscera, nerves, brain, heart, vessels and organs of sense, and it is endowed with special

sensibilities, with consciousness and voluntary movements, that these two classes of phenomena are only accidental, relative and non-essential?

"It is certainly true, that chemical affinities and molecular actions are indispensable to produce the varied special proximate organic materials of the fluids, tissues, organs and the living organism of the chick. But, without the presence of the germ, a fact neglected by Dr. Lehmann, this extraordinary play of specific chemical affinities and specialities of chemical actions, and the development of some hundred organic forms, included in the living being, from the formless organic matter, could not have occurred. Certainly, here are displayed, in the two classes of bodies—inorganic and organic—differences that are not accidental, or relative, and that are essential.

"The same general facts are observed in the germination of seeds. If the germ cell at the hilum of a seed be artificially ruptured, and it be placed in the same circumstances of germination with a perfect seed, the first will rot, while in the other are formed dextrin, grape-sugar, cellulose and albuminoid compounds; and these organic matters are developed into the tissues and organs of a perfect plant.

"In these, which are but single series of organic phenomena, the most absolutely marked and undeniable differences are to be observed between the two classes; it is impossible to regard them as 'accidental, relative and non-essential.'

"These phenomena have occurred in living beings with absolute constancy, in all generations of animals and vegetables, and are so completely under the control of positive law, that any one, or all of them, can be predicated and foretold with as much certainty as any chemical or physical action.

"Another argument urged as conclusive is the following: 'We should not lay down a new force, a general specific cause, until we have eliminated all other possibly operative forces from the group of phenomena in question. A proof of the existence of a purely vital force is hence only to be obtained by an exclusion of every physical force.' A full assent is given to the conditions of the argument; and it is affirmed most positively that the only phenomena—the exclusive attributes of a vital or organic force—the creation from a liquid formless plasm of typical organic forms, and organic instruments to execute physical, chemical, mechanical and dynamical actions, in the living organism, which are operative only during life, cannot be explained by any one, or all of the physical forces combined. They are absolutely excluded. Let the subject be expressed in special terms, and it is affirmed that neither heat, nor light, nor electricity, nor magnetism, nor gravity, can construct an eye, can form a retina, heterogeneous in its organic materials, complicated in the distinct organized anatomical elements of its structure, and endowed with a special sensibility—light and colors—manifested normally only when excited by a special external agent, the luminiferous ether. Nor can they generate the black pigment cells of the choroid coat, for the express purpose of suppressing the luminous rays, which have accomplished their impression, without which there can be no distinct vision; nor cause the formation anterior to the retina

of the vitreous humor and the crystalline lens, admirably adapted in form, shape and density, to refract the rays of light into a focus, the distance from the retina calculated so truly, as to subtend on it a visual focus, in which is a perfect representation of external bodies. The formation of this organic optical apparatus, constructed in the fœtus included in the ovum or uterus, excluded from the direct operations of the physical forces except heat, it is affirmed, is absolutely inexplicable by the physical forces, or by any known physical process or actions.

"The insuperable difficulties presented by these facts, it is sought to evade by assuming that, as the causes of physical actions are unknown, and that new physical phenomena may be discovered, a resort to a new force is useless and unscientific. But it will not be pretended that the causes of physical actions will ever be better known than they are at present; and, whatever new physical actions may be discovered, they cannot differ in their nature from those of the present known physical actions. They will be unable to furnish any new light to solve the nature and origin of phenomena that reach far beyond the range of the physical forces; to which physical forces and actions are accessories, but cannot hold the relation of productive causes.

"From the admission by Dr. Lehmann, in his argument 'that a new force may be assumed in science, whenever groups of phenomena are inexplicable by any known forces,' the assumption of an organic or vital force, as distinct from physical forces, and as presiding over the developments of the organic forms of living beings, is an unauthorized and legitimate deduction.

"A third argument, and the last that will be noticed as having a bearing on the question is, 'that the idea of a vital force is illogical; for a force is merely the abbreviated expression of a law from which the casual connection of certain phenomena may be deduced; and that a vital force corresponds to no law.'

"This statement proves that Dr. Lehmann has not investigated the physiological facts of embryology or organic development, or he could not have so broadly asserted that the vital or organic force corresponds to no law, and is not a necessary cause of multitudinous consequent phenomena.

"So far is this statement from being correct, it may confidently be asserted that the evidences of law, of casual connection and dependence are as strong, as palpable, in the phenomena, the direct results of organic or vital force—those of organization—as are to be found in any of the physical forces. A few facts will prove this position. Prevent the spermatozoon from reaching the egg, no monadiform germ cell, the primary form of all animals, is produced. Let this germ cell be artificially broken or injured, and no blastoderm will be formed; injure the blastoderm, and either no embryon and chick will be developed, or this last will be imperfect.

"Here are law and causal dependence and connection. Professor Owen, in his *Hunterian Lectures*, (ed. 1855,) has demonstrated that 'every animal, in the course of its development, represents some of the permanent forms of animals inferior to itself, but it does not succes-

sively repeat them all, nor acquire the organization of any of the inferior forms which it transitorily typifies. One organic form, the microscopic infusorial monad, is either permanently or transitorily represented throughout the animal kingdom. Other forms are represented less exclusively in the development of the animal kingdom, and may be regarded as secondary forms. These are the polype, the worm, the tunicary and the lamprey. They are secondary in relation to the kingdom at large, but are primary in respect to the primary divisions or provinces."

"In dissenting from the author's views of organic or life force, there has been no purpose of disrespect, or intention to undervalue his knowledge and the authority of his opinions on the special branch he has cultivated. It has been rendered necessary by the manner in which the subject has been treated. Almost exclusively physiological, it has been handled as a chemical question. All that has been urged by the author as to the extent, variety and importance of the chemical actions and influences of chemical laws in the living organism is perfectly just; but to force chemical affinity and its laws from their appointed ordinances in nature, is not correctly scientific, and leads to serious errors and misconceptions. Yet such a perversion, it strikes us, takes place when physics and chemistry are summoned to explain the origin and the permanent constitution of the typical forms of organization, differing so widely from the molecular processes and actions, exclusively the results of their special activity and energies in the plan of creation.

In adopting the handbook of Dr. Lehmann as a manual of organic chemistry for the use of the students of the University, and in recommending his original work of *Physioloyical Chemistry* for their more mature studies, the high value of his researches and the great weight of his authority, in that important department of medical science, are fully recognized."

We have quoted Dr. Jackson's views very fully on this question; they are extremely interesting, and we have no doubt they will bring conviction to the minds of most of his readers. We are not entirely satisfied with them, however, as it appears to us that he has trusted too much to the present work, which, as previously stated, is but an abridgment of the larger one; we submit the following, therefore, as a synopsis of what we conceive to be Dr. Lehmann's views:

Webster defines vitality as being, "first, the *principle* of life, and, second, as the *act* of living;" thus confounding, or rather combining in the same word the hidden cause that produces the action, with the manifestation of the act itself. This complication of ideas arising from the two-fold significance of the term, has extended even to those whose study is the laws of life, and

has produced endless and profitless disputes about *theories* and *systems*, when the point at issue in reality has only been the significance of a *word*. Dr. Lehmann, whilst admitting the necessity of a *great first cause* and of a *creator*, and rejecting as absurd the possibility of a spontaneous generation, or the growth of an organic existence from any other source than its germ, believes that we should not waste time in seeking for the *source* of life, but study the phenomena of *existing* life through the same medium that has already supported us thus far in the investigation of the works of God, viz., the laws of physics and of chemistry.

It is true that almost at the commencement of our investigations into the mysteries of life, we find metamorphoses and changes taking place which our stock of knowledge is utterly insufficient to explain, and as we advance deeper into the subject we soon lose the little light that has thus far guided us, and find ourselves in total ignorance of all around us. This condition of things operates differently on differently constituted minds, and whilst it causes some men to believe that the search is a right and just one, and that the path thus far followed must lead, if diligently pursued, to the utmost limit of knowledge allowed to mortal man, causes others to think the hope is futile of ever explaining the difficulties that oppose us, for that here the fixed and immutable laws of chemistry, etc., no longer reign, being deposed by the capricious rule of the *vital forces*, whose attributes are irregularity, uncertainty and mystery.

Among the numerous errors into which the mind of man is prone to fall, none have more frequently obstructed the progress of science than the practice of condensing into a single word or phrase the description of a law of nature or the manifestation of its action, and by thus investing as with a garment what is often merely a crude imperfect hypothesis, obtain for it a credence and position that is utterly undeserved in fact. The evil does not end even here, for the temptation to employ a *word* instead of an *idea* causes many men of even high intellect to rest satisfied with its use without further inquiry, and thus disseminate error or, at least, uncertainty, almost unconsciously. Often, it is true, such a term may rightfully include our whole knowledge of the subject, and when expressed may give utterance to all

that we could say. Thus, the laws of gravity or the attraction of gravitation are terms that admit of little amplification, since the *cause* of the attraction of matter by matter is an enigma that would be idle to attempt to solve. But the theory of catalysis, for instance, rests on a different foundation. It is at best but a term by which is understood a group of phenomena whose similarity consists in being alike inexplicable by known laws, from which group, however, the advances of science withdraws yearly its most prominent members by reducing them to natural laws. It is in this latter category that we should place the doctrine of the vital forces, when it is used as significant, not of the fact of vitality or of the living spirit within the animal form, but of an incomprehensible group of actions that do not admit of being indicated distinctly, that have no connection with each other, nor apparent means of effecting the desired end, that in fact elude our observation, both in their modes of action and in the effect produced; in other words, force us to acknowledge that we can neither explain nor understand them, which is precisely the state of ignorance we are in by the assumption of this doctrine.

It is needless to say that the physiological chemist does not and ought not to confound the chemistry and physics of the organic body with the unknown principle of vitality that is contained within it. The sporule of the humblest cryptogamic plant contains an immaterial essence that is as much, indeed, even more, beyond the reach of our gross senses than that contained within the ovum of a mammal; for if we could explain *why* the globule of the yeast plant grows by gemmation when placed in its proper element, we would then have a position that would enable us eventually to trace the vital principle through the ascending series of creation even to man himself. We would be master of the secret of vitality! But the physiologist *can* hope, some distant day, to follow step by step the operations of *natural laws* from the first endosmotic current through the vesicles of the germinating seed, to the development of the aged and giant oak—from the first appearance of the ovum, to the growth of the perfect man. The *cause* of the vitality is the same—one and incomprehensible —God!

The Causes and Curative Treatment of Sterility, with a preliminary statement of the Physiology of Generation. With colored Lithographs, and numerous wood-cut illustrations. By AUGUSTUS K. GARDNER, A. M. M.D., Permanent Member of the National Medical Association; Fellow of the New York Academy of Medicine; Member of the Massachusetts Medical Society, &c., &c. Author of Monographs on Ergot, Uterine Hæmorrhage, Rupture of the Perinæum, &c. New York: De Witt and Davenport, 160 and 162 Nassau Street.

We notice this book merely because we think it a duty we owe to the profession to discourage the publication of valueless works, and likewise to record our decided opinion that medical aspirants to literary fame, whatever may be the amount of their experience in the treatment of disease, should, if they must write, take into consideration the vital necessity of studying the meaning of the phrases and words they are about to inflict upon the public, and have at least a superficial knowledge of the grammatical construction of their own language.

Had Dr. Gardner given us anything new, had he said any thing which has not been better said, many times before, we might have excused his violations of the rules of syntax, and his occasional chaotic obscurity; but unfortunately this confusion of words is unredeemed by a single suggestive or novel thought.

We should be sorry to be thought unfair or uncandid in our strictures; in truth we should have said but little of these comparatively minor faults, were it not for the coarseness with which the subject is frequently handled. Description is necessary, we know, but such a topic every gentleman must feel cannot be approached too delicately. To make such books endurable, the style should be pure and at the same time severely scientific; when thus filtered through a refined and educated intellect, their themes become ennobled by purity and benevolence; divested of these elevating attributes, nothing remains but a grossness which offends and cannot instruct, which degrades a high calling in the minds of the educated and thinking portion of the community, and demoralizes by placing the fairest and gentlest of God's works before us as a mere machine for manipulation.

In order to prove that our remarks have not done injustice to Dr. Gardner, we must trouble our readers with a few quotations; we promise to be as brief as possible.

In his preface we find the following: "Occasionally these conditions arise from a defect in the provisions of nature, almost always, however, are the consequences of disease."

The little pronoun *they* before the are, would have rendered this sentence grammatical.

The next sentence informs us that "Sometimes the difficulties have been suffered to continue unchecked, till organic changes are effected which can never be *palliated.*" The symptoms of organic changes may be palliated, but we think the word applied to organic change itself inadmissible.

Again, Dr. Gardner says, "that organic changes may be alleviated." We should prefer some other word here; *alleviation* being more applicable to symptoms or effects.

At page 11, of the introduction, we find this sentence: "All men are curious by nature. They love to look into the interiors of even man's feeble constructions."

At page 67, speaking of the causes of sterility, "Such for instance, are numerous forms of tumors, and of local or other manifestations of constitutional syphilis, ~~which~~ according to its location may or not form a barrier to fecundation.

At page 68, the Dr. observes that obliquity of the womb may militate *with* the healthy action of the rectum and bladder.

On page 94, he speaks of extra delicate ladies:

On page 111, he says, "According to my own views, the reasons given for the want of fertility in the previous remarks embrace all the causes that exist, but there are a train of causes alleged by other writers."

Page 109, "there is usually certain physical peculiarities," &c.

At page, 115, Dr. Gardner, treats his readers to the history of a precocious child exhibited at Barnum's baby show; this child menstruated, or as our author expresses it had a bloody flow, at the age of ten months, which has continued periodically ever since. At four years of age "this flow," says Dr. G. "had been retarded for some two weeks longer than usual, and the mother seriously supposed her to be pregnant, as she had discovered a man (for which sex she evinced great fondness) in an

improper situation respecting her, and she had him arrested, and he lay in prison several days on this charge. The flow however soon reappeared." Now such cases of precocity have been described before, and we think that our author would have evinced more taste by simply stating that such curiosities have existed, than by repeating this story, which is disagreeable and offensive in its character from Barnum down to the woman baby.

We should advise Dr. G., in his second edition, to expunge the very coarse sentence at the end of the second paragraph on page 115. The statement was not necessary, and its omission would greatly improve the general texture of the work. The remarks on page 132 are equally offensive. The passage on page 18, where the phrase "regular monthly bloody flow" is used, might we think without much trouble be rendered differently.

We quote the following passage merely as a curiosity in construction.

"Ante and retroversions are among the most troublesome forms of uterine disease, *and too*, are far more common than has been supposed."

We cannot afford to waste further time on this catologue, which might be extended almost *ad infinitum*. But we are satisfied that these few extracts will sufficiently sustain us in the opinion we have given, which is all that we require.

To conclude, the author is evidently a man of good perceptive powers, and considerable practical capability, and has studied carefully the best physiological writers on conception, generation, &c. He is, we have no doubt, a good practitioner; that is, he introduces catheters and bougies and forceps with great ease to himself and satisfaction to his patients. This is his vocation; we cordially wish him success in it, but as cordially we hope that he will write no more such books; his bad English we might have passed lightly over, but there is a want of delicacy in his phraseology which peculiarly unfits him for writing pleasantly or even readably on the subject he has chosen. When we first opened this volume the frontispiece astonished us, and was prophetic of all the coarseness which succeeds. As a sincere well wisher of Dr. Gardner, we would honestly advise him in his next edition to dispense with that curious and suggestive specimen of art.

A Manual of the Practice of Medicine. By GEORGE HILARO BARLOW, M. A. and M. D., Cantab. &c. *With additions, by D. Francis Condie, M. D., &c.* Philadelphia: Blanchard & Lea. 1856.

In accordance with the plan he has laid down for himself or the necessity by which he is bound, every author has the undoubted right to make his work either a full representation or a condensed outline of his subject; he may exercise his own pleasure, also, regarding the omission of certain topics, without his readers having any just right to complain; it is his duty, however, to give such a title to his work when finished as will afford all who wish to obtain it, a correct opinion of the nature of its contents. This Dr. Barlow has not done. He styles his work a Manual of the Practice of Medicine, and yet omits even the names of numerous diseases which the practitioner may be at any time called upon to encounter. Among these, we notice diseases of the skin, of the spleen, of the pancreas, gangrene of the lungs, emphysema, and a host of others equally important. This want, the American editor has in some degree supplied it is true, by the addition of articles on Cholera Infantum, Cerebro-spinal Meningitis and Yellow Fever; yet even with these aids, as a Manual of the Practice of Medicine it must be allowed to be exceedingly incomplete.

It is evident, also, that the author has devoted much more time and labor to some subjects than to others. The articles, for instance, on Phthisis and Diseases of the Heart and Liver, are extremely well written and full for such a work, and may be consulted with profit by practitioners as well as students. Bright's disease is also fully discussed. In the treatment of other affections, hooping cough, epidemic cholera, &c., he is extremely meagre and unsatisfactory. The following are his conclusions regarding the identity of typhus and typhoid fever—both of which diseases he treats of under one head: "The conclusion," he says, "which it appears we may most legitimately draw from our present information upon this subject is, that in the fevers in which the mulberry-colored and livid spots are present, there is a greater tendency than in others to assume the low, sinking form, and perhaps a greater liability to head affections, but that never-

theless there may and frequently does occur severe bowel irritation, with inflammation and ulceration of the lower portion of the ileum. When there is the rose colored rash, on the other hand, there is almost always great bowel irritation, and not such early depression from the effects of the poison; but the frequency with which one form of the disease has been found to occur side by side with the other in many epidemics, though it may not have done so in all, and the almost imperceptible difference by which they appear to be distinguished in some instances, seems at present to preclude the belief that they are specifically different." From this opinion we dissent *in toto*.

In spite of the short-comings we have pointed out, we feel ourselves justified in recommending Dr. Barlow's work as the production of an experienced and judicious practitioner, one whose knowledge of disease and its proper treatment has evidently been obtained less from books than from practical experience at the bedside. Few physicians, we imagine, will rise from the perusal of this manual, without receiving some instruction from it. The American Editor's additions add greatly to the value of the work.

THE MEDICAL EXAMINER.

PHILADELPHIA, JULY, 1856.

MEDICAL NEWS.

THE LOUISVILLE REVIEW.

The above is the title of a new journal edited by Prof. S. D. Gross and T. G. Richardson, M. D., published every alternate month in Louisville, Kentucky. In offering a new Journal to the profession, the editors use the following language: "We cannot conscientiously say there is a call for another, notwithstanding the hiatus that has been produced by the suspension of the Western Journal of Medicine and Surgery, the oldest and the ablest publication of the kind that the valley of the Mississippi has ever produced. But, as stated in a circular issued some weeks since, we have undertaken the enterprise 'as

a labor of love,—love for the labor and for the glorious profession in which we are actively engaged ;' and this is our only apology to that class of Pre-Adamites who are startled from their ancient propriety, and consider themselves personally affronted by every new thing, and this, our only introductory to the liberal minded progressive few who heartily welcome every honest endeavor which has for its object the diffusion of knowledge and the progress and improvement of a noble science." They inform their readers also that it is their intention to devote their best energies particularly to the Review Department, by which means they expect to keep them *au courant* with the host of new medical works "that are shouldering" each other into the notice of the profession, not neglecting, however, those sections usually devoted to original communications and selections.

We most sincerely and heartily wish success to this new enterprise, and judging from the specimen number we have received, we think it not only fully deserves but will obtain it. It occupies 144 pages, is handsomely printed, and contains three long and excellent reviews, one of which is upon the Life and Services of Dr. Drake, headed by a fine engraving of that gentleman. Among its original articles, is a valuable paper on Vesico-Vaginal Fistula, by Dr. Bozeman, of Montgomery, Alabama, with an account of seven successful cases, in all of which the new mode of suture invented by him, called the Button Suture, was used. The record department contains much interesting matter also.

Although it has given us much pleasure to speak thus highly of this new aspirant to professional favor, we consider it to be equally our duty as journalists, to record our disapprobation of many of the sentiments expressed in its editorials, in several of which there is manifested a spirit of hostility to Eastern journalists, for which we are entirely unable to account. "We do not aspire," says the first of these, "to the censorship of the medical literature of this country, or even the directorship of those who kindly place themselves within the range of our journal, but we are determined that so long as we live, and with whatever strength we possess, we shall cry out against the servile bending of the knee to the English Baal of medical criticism so common in some sections of the country, more especially in that part which was the first boldly to throw off the political yoke that England had placed upon our necks. We congratulate our Southern and Western brethren in their comparative freedom from this shameful idolatry, and we hope we have good reason to believe that they never will submit to its degrading influence."

We sincerely regret to see such sweeping imputations, and vague as

they are sweeping, charged against any portion of the union. They are provocative of a spirit, that, largely indulged in, cannot but exercise a most injurious influence upon the good feeling which at present exists among all the journals of our country. Such appeals to sectional prejudice we know, are not uncommon in political harangues; we consider them out of place, however, in a respectable and scientific journal, one of whose endeavors, and not its least one, should be the maintenance of a friendly and fraternal feeling between the members of a common profession. The charge, which we fully believe to be unfounded, is the more remarkable, coming as it does from one who has so little to complain of in the manner in which he has been treated by the very critics whose good nature and sense of justice he thus takes the earliest opportunity to wound.

In another editorial, the Boston Medical and Surgical Journal, and by implication all other journals who have copied the article, are charged, when noticing the recent researches of M. Brown-Séquard, with ignoring Dr. Bennett Dowler's claims to discoveries made upward of twelve years since, upon the functions of the spinal nerves. We have looked through several recent American works on Anatomy and Physiology in relation to this subject, and in none of them have we found any mention made of Dr. Dowler's views. All of them, in fact, agree with Dr. Richardson, the junior editor of the Louisville Review, who makes the following statement in his Elements of Human Anatomy, (1854:) "Each spinal nerve originates from the side of the cord by two distinct parts or roots, called from their relative position the anterior and posterior roots; of these, the former is entirely motor and the latter sensory in its function." It would be preposterous to suppose that there existed a combination among all the writers of these works to reject Dr. Dowler's views; for reasons best known to themselves, they took no notice of them. Under these circumstances, we do not see why the charge mentioned above should be specially aimed against an Eastern Journalist.

We hope that the freedom with which we have expressed ourselves on this subject will not be misconstrued. No one has a higher respect than ourselves for the gentlemen who occupy the position of editors of the Louisville Journal. The profession is largely indebted to the senior editor in many respects; as author of various treatises his name is favorably known throughout the world; we hear with pleasure also, that his lot will hereafter be cast among us; may we trust that a better acquaintance with us will have the effect of dispelling the mists that distort his editorial vision upon the subjects we have above referred to.

New York Hospital.—Dr. J. G. Cheeseman has resigned his situation as surgeon of this institution, having served it faithfully, for the period of thirty six years.

—

Dr. Charles E. Ware has been appointed, by the trustees of the Massachusetts General Hospital, to fill the vacancy in the board of physicians occasioned by the resignation of Dr. M. S. Perry.

—

Latest Parisian Notions on the Administration of Chloroform—*From a Correspondent.*—At a lecture delivered by M. Grisolle, on the 8th inst., at the l'Ecole de Medicine, Paris, on the subject of anæsthetic agents, more particularly chloroform, and the accidents liable to occur from their employment—he stated, that the most troublesome result accompanying the use of chloroform, was spasmodic coughing; the most dangerous result was syncope. The principal characteristics of the latter effect, when produced by this agent, were the extreme suddenness of its occurrence, and the difficulty, or rather impossibility, owing to the patient being at the time in a state of anæsthesia, of applying any of the stimulants ordinarily used in syncope, as under the circumstances they have no effect. After citing all the methods that have been tried for the recovery of patients apparently dead from the effects of chloroform, he concluded, that decidedly the best was the attempt at restoring respiration by the operator blowing into the patient's mouth, his own being directly applied to it; and, as the tongue is liable to fall back upon the glottis, and thus impede the entrance of air into the larynx, that no hesitation should be had in transfixing it with a ligature in order to pull it forward. [Or still better, as Mr. Syme long ago recommended, seize hold of the tongue with the bull-dog forceps.] M. Grisolle considered that in those cases where the circulation was weak, ether was perhaps to be recommended in preference to chloroform, as having a more stimulant effect, and, consequently, less chance of inducing syncope. In closing his remarks, however, he stated that all anæsthetics must be regarded as unsafe agents, and not to be prescribed except in severe cases, and by no means to be indiscriminately employed in trifling cases, such as extraction of teeth, etc.—*Edinburgh Medical Journal.*

—

Revolution among the Eclectics.—The "Eclectic Medical Institute" in Cincinnati has been the scene of a riotous demonstration, in consequence of a quarrel among the members of the faculty It seems that a Dr. R. S. Newton had rendered himself obnoxious to the other professors, in consequence of some reflections upon them in the "*Eclec-*

tic Medical Journal," conducted by him. He was joined by Dr. O. E. Newton and Dr. L. Freeman, the alliance of the latter arising in consequence of "a difficulty in relation to a female student." Against them were arrayed the rest of the faculty, Drs. Cleaveland, Sherwood, Buchanan, Hoyt and King. The Newton faction forcibly entered the Institute in the night, and endeavored to take possession, but were resisted by Dr. Cleaveland and the others. Dr. C. was attacked "by the Newtons, Dr. Freeman, Dr. F.'s brother, a medical student, Dr. Newton's Irish boy Dan, and other parties, who threatened to kill him." A general fight ensued, with clubs and other weapons, but no one was injured. Dr. Newton and his party retreated up stairs, and occupying the lecture rooms, prepared for a defence. Dr. Sherwood, and a number of students and the police, took possession of the lower story. Dr. Newton's party wore afterwards discovered "attempting to get a small cannon in the back way, and the police captured it." The Newtonians had bedding, food, wine and lager beer, and were determined to stand a regular siege. At the last accounts, things were in *statu quo*. In the language of the Cincinnati *Daily Freeman*, to which we are indebted for the above facts, "we wait with anxiety for the result."

Boston Med. and Surg. Journ.

Death of Dr. Warren.—Dr. John Collins Warren, the eminent Boston surgeon, died on the 4th of May, in the 79th year of his age. His death could not be attributed to any distinct disease; his health had been bad for several years, and his vital powers were finally exhausted, without any important local affection. Dr. Warren was born in Boston August 1st, 1778. His father, Dr. John Warren, was a distinguished surgeon, and his uncle was the General Warren, the martyr of the revolution, whose name is so closely associated with the battle of Bunker Hill. Dr. Warren graduated at Harvard College in 1797. He pursued his professional studies in London, being a pupil of William Cooper, and subsequently of Astley Cooper. In 1806, Dr. Warren was appointed Adjunct Professor of Anatomy and Surgery at Harvard College, and in 1816, he succeeded his father in the full professorship. He held the chair of Anatomy until the year 1847. He succeeded Dr. James Jackson as president of the Massachusetts Medical Society in 1832, and filled this office four years. In 1803, he married Susan Lowell Mason, by whom he had six children. She died in 1841. In 1843, he married Anna Winthrop, by whom he had no issue. She died in 1850. Dr. Warren was a friend of the temperance movement, and for a long time presided over the Massachusetts temperance society. At the organization of the Massachusetts general hospital in 1817, Dr. Warren was elected surgeon to this institution—a post he retained

until a few years before his death. At the time of his death he was emeritus professor of Anatomy and Surgery in Harvard College, president of the Boston Society of Natural History, a member of the American Philosophical Society, of the Philadelphia Academy of Natural Sciences, of the Academy of Naples, and the Medical Society of Florence, an honorary member of the Medico-Chirurgical Society of London, and a corresponding member of the Royal Academy of Medicine of Paris.—*Virginia Medical Journal.*

—

Death and a Will.—Vidal (de Cassis) died at Paris, in April last, In our own country, Dr. J. G. Percival, the poet, and Dr. John C. Warren, of Boston, are also gone. This last gentleman left a singular will, requiring his body to be placed in a tomb, with the usual ceremonies, and that the next day *after* it should be taken from the tomb, and an examination made, to ascertain the cause of certain obscure symptoms of disease under which he had for a long time labored. Then the will directs that his bones shall be macerated, wired, and hung up in the Museum of the Medical College in Boston. The will was peremptory. We learn that everything has been done as he directed, and that his bones are now macerating. There was found to be malignant disease of the stomach.

We confess that we feel a shudder creep over us when we think of this will. Had science required it we should have admired the self-sacrificing spirit which prompted it, bnt no such demand exists which could not be carried out infinitely better without shocking the feelings of any one. It is to be hoped that the trustees will put the skeleton into a case entirely of wood, at least till all of his friends have gone, and are no longer shocked by the sight. One thousand dollars were left by him for publishing his biography. One thousand dollars more to keep his tomb in repair forever. But *why* one does not see. *Nothing* was left to any hospital or other charitable institution.—*American Medical Monthly.*

—

Several specimens of Mathey-Caylus's preparations, consisting of capsules of Copaiba and Cubebs, Copaiba and Citrate of Iron, Copaiba and Rhatany, &c., have been left with us for trial. The peculiar advantages of these capsules are that "Although smaller by one half than the gelatine capsules, they contain as much Copaiba, owing to their envelopes being much thinner. In fact, the Gluten Capsule weighs hardly two grains and a half, whilst the gelatine capsule weighs at least twelve grains—a fact which may be easily verified."

We have had no opportunity for using any of these preparations ourselves; several of our friends, however, who have, speak very warmly in their favor.

RECORD OF MEDICAL SCIENCE.

Cases and Observations Illustrative of the Connexion between Certain Forms of Pneumonia and Renal Disease. By BENJAMIN GEORGE M'DOWEL, A. B., M. D., Physician to the Whitworth and Hardwicke Hospitals, &c. &c.

The object of the following communication is to direct attention to a combination of morbid conditions, which, as far as I know, has not hitherto been *specially* noticed, but which, it is conceived, may prove of some use in extending our knowledge of the etiology of certain diseases. I now allude to the frequent coexistence of certain suppurative inflammations with chronic renal disease, but more especially to the combination of the latter with the suppurative and gangrenous forms of pneumonia, of which a considerable number of cases have come under my observation within a comparatively short period.

This combination of morbid conditions has occurred too frequently to allow me to regard it as a mere coincidence; and I think I shall be able to furnish good reasons for adopting the opinion:—1. That when pneumonia occurs in connexion with renal disease, it has a remarkable tendency to assume the suppurative or gangrenous form; and 2. That we are to regard the morbid condition of the kidney as the predisposing cause of these very fatal terminations of a disease which otherwise terminates favorably in the vast majority of instances.

At a recent meeting of the Pathological Society (January 19, 1856,) I exhibited a specimen of gangrenous pneumonia, in which a diseased condition of the kidneys likewise existed. The particulars of this case will be detailed further on (see Case IX.): but the observations then made, and which have a direct reference to the subject under consideration, were as follows:—"Dr. M'Dowel particularly directed the attention of the Society to this combination of disease, and stated his belief that chronic renal disease had a great influence on the development of suppurative inflammations. This he had especially observed in pneumonia, as, for the last eighteen months, during which period he had paid particular attention to this subject, *he had not met with a fatal case of suppurative pneumonia in which renal disease was not found to exist.* His opinion was, that pneumonia, in the great majority of instances, passes through certain regular phases, which naturally tend to a restoration of the healthy condition of the lung: but that when pneumonia occurred in a person in whom renal disease had pre-existed, the tendency of the disease then was to assume the suppurative, or the gangrenous form."

My object now is to adduce the evidence on which this opinion was founded.

Double Pneumonia. Purulent Infiltration of the Lungs. Bright's disease of the Kidney. Death on the sixth day.

Thomas Wood, a carman, thirty-two years of age, was admitted into

the Hardwicke Hospital, under Dr. M'Dowel's care, August 5, 1853. Patient was a man of very intemperate habits. Three days before admission (Sunday) he got drunk, and was exposed all night to wind and rain. He returned home early on Monday, feeling chilled and ill; violent rigors followed, with cough and oppression of the breathing.

On admission (fourth day, Wednesday), the face was darkly flushed, the dyspnœa intense, and there was total prostration of strength. Respiration 44; pulse 130 in the minute; skin extremely hot; there was frequent cough, with thin, scanty, colorless expectoration; and pain on inspiration in the left side.

Double pneumonia was found to exist, the right lung being principally engaged; more than half of this lung gave the signs of solidification; over the portion of the left lung friction likewise existed, denoting the co-existence of pleuritis.

Fifth day. Right lung wholly solidified.

Respiration 52; pulse 140: raved incessantly all night; dyspnœa more urgent; vomiting; died on Thursday evening, sixth day of the disease.

Autopsy. Thoracic Viscera.—Double pneumonia, with pleuritis on the left side. The right lung was solidified throughout, and infiltrated with dark colored pus; the tissue of the lung was very friable and non-crepitant. The left lung was solidified in patches, in all of which pus was diffused. The uninflamed portion of the lung was emphysematous.

The pericardium was extremely adherent to the heart; in some places the adhesions consisted of bands of half an inch long. The heart was enlarged and hypertrophied, weighing 16 oz. when separated from the pericardium. Its tissue was slightly softer than natural, but its valvular apparatus was perfectly healthy.

Abdominal Viscera.—The liver was large and pale. The spleen softened, but of natural size.

The Kidneys were extensively diseased; externally both were pale, smooth, and mottled. The tubular structure had nearly altogether disappeared, and white, soft, fatty-looking material occupied the greater bulk of the organ. The left was much diminished in size. The right weighed 5½ oz., and the left 2½ oz. only; in the latter a fibrinous clot of a brown color lay in a small cavity, with the walls of which it had but a very slight connection.—(*Pathological Register of the Whitworth and Hardwicke Hospitals*).

Six other cases of the co-existence of pneumonia with renal disease, are given; we omit them, as they are very similar to the above.

If we exclude Case v., which terminated in circumscribed pneumonic abscess, and in which life was prolonged for forty-seven days, the cases now detailed are all very similar. In them we see pneumonia running a very rapid course, terminating fatally in from six to nine days, and death the result of a profound impression on the system generally, rather than of asphyxia; for, as a general rule in these cases, dyspnœa was not even complained of; as if the nervous influence was so much lowered, or overpowered, that animal sensibility had become almost ex-

tinct. The condition of the kidneys was likewise very similar in all, being large, soft, and pale, and the seat of some adventitious deposit, which, more or less extensively, replaced the normal structure. In one case only was a different condition found to exist (Case IV.), and in it the kidney was sacculated or multilocular, and contained much pus. As it is usually met with, pneumonia is a disease which naturally tends to recovery, and which I can confidently state requires no heroic treatment to subdue it; but when it occurs in connection with an unsound condition of the kidneys (being *dependent*, it may be, on such condition), we are presented with a totally different form of disease, and one which too often will terminate fatally, notwithstanding the best directed treatment. And it may be deserving of future investigation to inquire, whether the danger which so notoriously attends "typhoid pneumonia," of which disease each one of the preceding cases, except Case IV., might be taken as a type, may not be found to depend upon the fact, that this form of disease is developed as the result of some constitutional fault, which, when traced to its source, may be found to originate in renal degeneration.

Direct evidence, I think, has now been furnished of the influence which renal disease exercises on the course, duration, and result of pneumonic inflammation, and especially of the tendency of pneumonia, under such circumstances, to pass into suppuration. On the other hand, if, in fatal cases of pneumonia, in which suppuration had not occurred, the kidneys were found healthy, we would have an additional argument in support of this opinion; but as pneumonia rarely proves fatal unless suppuration has first occurred, this evidence is more difficult to be procured; it is furnished, however, by the following case.

Pleuro pneumonia. Death from suffocative Catarrh on the thirteenth day. No pus in the lung. Kidneys healthy.

John M'Kenna, aged 60, was admitted into the Hardwicke Hospital, under Dr. M'Dowel's care, June 5, 1851. The day before he was attacked with shiverings, headache, and pain in his left side, accompanied by such lassitude that, to use his own expression, "he was knocked down by it at once;" although he was so short a time ill, he was extremely weak. The chest was carefully examined, but only some bronchitis on the left side could be detected. Pulse 100, and compressible. He was ordered camphor mixture, with aromatic spirit of ammonia. His condition remained the same until the 8th, when he became much worse; he raved, and had become much weaker. Pulse 88, weak and intermittent. The lower half of the left lung was now found to be solidified; the lower half of that side of the chest was dull to percussion, and over the same extent the vascular murmur was replaced by tubular breathing. Bronchitis existed to a considerable extent on the right side; expectoration scanty, viscid and lemon-colored. To be dry-cupped extensively; a blister to be subsequently applied over the dull side; blue pill, carbonate of ammonia, and ipecacuanha in pill; wine 8 oz.

12th. Is much improved. Pulse 56, and regular; crepitus reduced, and diminution of bronchial breathing on the left side.

Continued steadily improving until the 15th, when it was found that alarming symptoms had become suddenly developed. His lips were livid; there were extreme dyspnœa, and a cold, damp, condition of the surface; effusion had taken place into the tubes, and a loud, mucous rattle was universally present. A large blister was applied between the shoulders, a mustard emetic administered, whilst wine was given liberally.

16th. No improvement; no emetic effect had been produced; whiskey and ammonia were given freely, but the patient gradually sank, and died the same night, being the thirteenth day of the disease.

Autopsy.—Right lung largely distended with air, and œdematous; much frothy serum exuding when incisions were made; bronchial tubes on both sides filled with a similar fluid; recent lymph effused on left pleural surfaces generally, but more especially in the region of the diaphragm. Lower lobe of the left lung completely hepatised; it sank in water, and was friable, but did not contain any pus. The heart was healthy; the kidneys were congested, but healthy.

The termination of pneumonia in gangrene may likewise be found associated with renal disease. In four instances, which have very recently come under my observation, this association of morbid conditions existed; but how far this combination of disease is to be regarded as the general rule, or its exception, must be determined by a more extended series of observations.

The author then details four cases of gangrenous pneumonia, in all of which disease of the kidneys existed.

These cases (12 in number) constitute the evidence in support of the opinion, already several times expressed, that between pneumonia in its worst and most fatal forms, and structural disease of the kidneys, some definite relationship exists. If this opinion be adopted, and if we regard the combination of diseases illustrated by these cases, as representing parts in one great chain of pathological sequences, then the order of these sequences is easily traced out. It is no new doctrine that a diseased condition of the kidneys cannot long exist without an impairment, more or less serious, of the great function of excretion. A morbid condition of the blood is established as the result of imperfect depuration; hence arise certain secondary affections, of which (in connection with diseased kidneys) serous inflammation and affections of the brain and heart have attracted the most attention. But it is probable that the secondary affections which depend on organic renal disease will vary according to the stage of the disease, or according to the peculiar form under which it is manifested.

"Bright's disease," we now know is a generic term which includes several dissimilar diseased conditions of the kidney; and, whilst inflammations of the serous membranes may be more frequently associated with one particular form of disease—viz., the small, contracted "granular" kidney—pneumonia in its worst forms (gangrenous or suppurative) may be more peculiarly the secondary results of the large, smooth,

pale kidney, which was so uniformly found to coexist in the cases already detailed.

In these observations my object has been to avoid theorizing, and to furnish a simple statement of clinical facts; and I am perfectly ready to adopt or reject the opinions here advanced, as more extended observation may either confirm or refute them.

At another time I hope to be able to furnish some evidence of the influence which renal disease exercises on the development of pyemina in general; and, in fine, will very briefly state the conclusions which I think may naturally be deduced from the cases given in the preceding pages:—

1. That in fatal cases of pneumonia renal disease is very frequently found to exist.

2. That where such a combination of disease exists, suppuration of the lung will be very constantly met with.

3. That a similar morbid condition of the kidney is often found in gangrene of the lung.

4. Or, it may be conversely stated, that where pneumonia supervenes in a person, in whom renal disease has previously existed, it is very apt to assume the suppurative or the gangrenous form.

5. That pneumonia, when it occurs in such fatal forms, and under such circumstances, is probably one of the "secondary affections" of "Bright's disease."

It has not been my intention to convey the idea that pneumonia has never been enumerated by authors as one of the complications of "Bright's disease;" though some writers are silent on the subject, others have distinctly noticed it, especially Rayer. But it will be found that the pneumonia described in this paper is of a different nature from that noticed by Rayer. The pneumonia which he describes as secondary to "albuminous nephritis" comes on at a late period, and after the dropsy and other symptoms of the renal disease have been fully pronounced; and hence he observes:—"The symptoms of such pneumonias are more or less marked by those of dropsy, or by the symptoms of cardiac disease, or other concomitant pulmonary lesions." In none of the cases above described was renal disease suspected to exist; all were apparently in the enjoyment of good health up to the moment of the sudden development of the pulmonary affection. Neither do the cases of pneumonia, alluded to by Rayer and other authors (Bright, Gregory, Christison), resemble, in their anatomical characters, those detailed in the preceding paper. Suppuration and gangrene, either of which was found in all these instances, were not observed by any of these authors. One of Rayer's cases, however, is an exception to this statement—Case XXXVIII.—in which external suppuration of the lung was found found to exist. In the other two (for only three cases are given by Rayer in illustration) red hepatization and œdema, with engorgement of the lungs, were the principal morbid changes.

On Simple Ulcer of the Stomach.—By. M. Cruveilhier.

M. Cruveilhier has recently presented two papers to the Acadèmie des Sciences upon this subject, and the following are the general conclusions:—1. There exists a disease of the stomach that may be anatomically characterised as simple ulcer of the stomach, usually chronic. 2. This lesion, which is far more common than is usually supposed, differs from cancerous ulcer, with which it is generally confounded, in its curability. 3. It is susceptible of complete cicatrization, this being accomplished by means of very firm fibrous tissue, differing essentially from scirrhus, with which it has been confounded. 4. When the ulcer penetrates through the whole of the coats of the stomach, the loss of substance is repaired by surrounding organs, which also sometimes participate in the ulceration. 5. Danger may continue even after the cure of the ulcer, as the cicatrix often becomes the seat of consecutive ulceration, with all its attendant accidents. 6. It is one of the most frequent causes of blackish vomiting and dejections, and the most frequent one of hæmorrhage of the stomach, whether accompanied by hæmatemesis or not. 7. Simple ulcer is the most frequent cause of perforation of the stomach. 8. The two principal accidents are hæmorrhage and perforation, which take place more commonly consecutively-*i. e.*, by the erosion of the cicatrix, than primarily, or during the period of formation of the ulcer. 9. This ulcer, or ulcerative gastritis, may be always suspected, and almost always positively diagnosed. 10. It is distinguished from idiopathic gastralgia by the permanence of the symptoms it gives rise to, although these have alternations of exasperation and remission. Gastralgia is only temporary, comes and goes suddenly, leaving no traces of its presence, and may be suddenly relieved by opiates. 11. It is distinguished from non-ulcerative gastritis and gastralgia by black vomit and stools. It is very probable, however, that simple ulcer may exist without these discharges, and then its diagnosis from gastritis would be difficult. These black discharges are not characteristic of cancer; and, to some extent, are more inherent to simple ulcer than to it, for they belong to all periods of simple ulcer, of which they constitute the first symptom, while cancerous ulcer is not attended with them until the last stage, and sometimes not at all. 12. The distinctions between simple and cancerous ulcer are founded on, first, the physical signs, there being no tumour in the former; and, next, on the pain which is often absent in cancer but never in ulcer. The pain in the latter is like that of an open wound or burn, opposite the xyphoid appendix, striking through to the spine. In cancer there are cramps or spasmodic contractions, with induration of the stomach. 13. The true touchstone is the effect of alimentary regimen, which completely fails in cancer, but succeeds surprisingly in ulcer. 14. The great object in treating the disease is to find an aliment that is tolerated by the stomach without pain, for then the cure may soon be effected. In the immense majority of cases, milk diet induces improvement from the very first day, and sometimes operates like magic; but when it ceases to be agreeable to the patient, or fatigues the stomach, we must unite it with other substances, in the choice of which the instincts of

the stomach must be consulted. Alimentary regimen, in fact, constitutes the entire treatment, but nothing can be more difficult than the direction of this, according to quantity, quality, repetition, preparation, and temperature. 15. Medicinal substances, whether general or topical, are quite secondary in importance. Iron and bitters are quite contra-indicated; and opium only succeeds when gastralgia is associated with the inflammatory action. Gaseous waters, ice, alkalis, and especially phosphate of lime prepared by the calcination of bone, alkaline and gelatinous baths, cold ablution of the entire surface, (in some cases very hot ablutions), cold baths, and, in some cases, very hot sitting baths, stimulant frictions, with shampooing of the entire surface, derivatives or revulsives applied to the epigastrium—are the means which have seemed to exert most influence on the progress of the disease. 16. It must never be forgotten, that this ulcer is very liable to relapse, such relapse sometimes going on to hæmorrhage or perforation. Such relapse may be certainly prevented by a good alimentary hygiene, and avoiding medicinal stimuli.—*Med. Times & Gaz. from Comptes Rendus.*

Extracts from the Records of the Boston Society for Medical Improvement. By F. E. Oliver, M. D., Secretary.

April 14th.—*Apoplexy during Labor. Effusion of Blood into the Pons Varolii and Crura Cerebri. Death.* Case reported by Dr. John Homans.

Mrs. ———, aged 32 years, of plethoric habit and nervous temperament, though generally enjoying good health, with the exception of headache, to which she had been subject from childhood, was married April 9th, 1853. She became pregnant in April of the following year, and aborted in July, about the end of the third month. She again aborted at the same period of pregnancy in June, 1855. Her third pregnancy commenced immediately after this occurrence. She suffered much from sympathetic affection of the stomach during the whole of the first two pregnancies, and until the sixth month of the last. At about the middle of the eighth month, her limbs began to swell, and her whole body became gradually anasarcous, so that she was quite clumsy in her movements. Occasionally she complained of headache, especially in the morning. On the 20th of March, 1856, Dr. H. was called to see her on account of these two symptoms. About sixteen ounces of blood were taken from her, and some laxative medicine was ordered, together with a strictly farinaceous diet. The urine examined at this time, was found to be highly albuminous. Relief from her troublesome feelings followed this treatment until March 27th, when the headache returned, and the swelling, which had diminished, again increased. Blood-letting was again resorted to, to the amount of twelve ounces, and a cathartic given. The pain in the head ceased immediately after the bleeding; she expressed herself as feeling remarkably well, and engaged in the amusements of the family during the day and evening. About 1 o'clock, A. M., March 28th, the cathartic operated freely, after which she complained of nausea, and vomited a frothy

mucus. This occurred several times, and was attended with severe pain in the epigastric region, which became so intense as to cause her mother to send for Dr. Homans at 3, A. M., though against the wishes of the patient, who thought the pain would soon pass off without medical aid. Dr. H. found her suffering from pain as above, and also in the head. Immediately after his arrival she had a severe convulsion, lasting three minutes; from this she rallied, and said she felt better. An hour after, a second convulsion occurred, more severe and of longer duration. She did not recover as before, and exhibited but slight indications of consciousness, which soon entirely disappeared. Her face during the convulsions became exceedingly livid, and this continued to be the case in some degree afterwards. She was perfectly motionless after this second attack; her eyes were shut, and her respiration labored though not stertorous. After an interval of two hours a third convulsion took place, less severe and shorter in duration than the others. At this time, about 8, A. M., the waters were spontaneously discharged, she having before exhibited some indications of being in labor, by pain, and bloody discharge from the vagina. The *os uteri* was dilated to about the size of a dime. The respiration soon became somewhat stertorous, though not at any time remarkably so. The pulse, before the first convulsion, was about 100; subsequently, between 80 and 90. Whenever there were symptoms of the commencement of a convulsion, sulphuric ether was administered by inhalation, with the apparent effect of averting them. She remained motionless and senseless, without any other convulsion, till death took place, about 1 o'clock P. M., suddenly and easily. There were no signs of the life of the fœtus after the first attack. The labor advanced no farther than above described.

Autopsy, 46 hours after death—the body having been preserved in ice.

Head. The vessels were well filled with blood; the convolutions somewhat flattened; considerable white softening of the *septum lucidum* and of the parts immediately surrounding the lateral ventricles, which contained much more fluid than usual. There was quite a large effusion of blood into the *pons varolii* and *crura cerebri.*

Thorax. The *lungs* and *heart* were normal.

Abdomen. Scattered through the substance of the *liver*, which was of a deep-yellow color, were a large number of dark-red maculæ, from half a line to one-fourth of an inch in diameter, resembling those of purpura on the surface of the body. The cortical substance of the *kidneys* had a somewhat rough, unhealthy look, and did not as strongly contrast with the tubular portions as in the majority of cases. On microscopic examination, nothing remarkable was noticed.

The *uterus* contained a well-formed female fœtus of the full term.

The other organs presented nothing remarkable.

The specimen consisted of the *pons varolii*, and portions of the cerebral matter immediately surrounding it. It has been preserved for more than two weeks by Dr. Putnam, in chloroform, and was quite unchanged, save that the consistence was somewhat firmer than at the autopsy. The clot was directly in the centre of the *pons varolii*, also involving the

crura cerebri, consisting of about half an ounce of blood. The portions of the brain in the immediate vicinity were somewhat softened and slightly yellow.—*Boston Medical and Surgical Journal.*

Extract from Dr. Benjamin W. Richardson's Oration on the Vocation of the Medical Scholar, delivered before the Medical Society of London.

We are sometimes accused by the world of being prejudiced, and of being bound to certain dogmas, set phrases, systems, and ceremonials. We are not alone in this position; for no body of men were ever yet banded together for the most sacred objects without having similar inuendoes thrown into their teeth. But we feel these reproaches the more frequently, because they are the hues and cries of quacks, as every one knows.

Let a selfish, shallow, ambition-crazed German palm on the world, with great noise, a defunct dogma, and promise to cure diseases by thrusting nothing under heaven in the pretence of something potent over earth, down the throats of deluded suffering men, and when the monstrous foolery of the system and the practice is repudiated by the stern and clear common sense of the medical body, the impostor at once makes market of the repudiation, and by heavy and groaning appeals to honesty, justice, and such like homely requests, which go to the heart rather than the intellect, he positively wriggles his way into a kind of silly position, and founds a system which, being of the lowest human, is, of course, temporary and trumpery.

Or let another man start on no system at all but sheer impudence, falsehood, and the invention of some absurd nostrum, and lo! he finds it a splendid advertisement to open the campaign, and to keep it open, by attacks on the doctors, who, for their parts, do not think him worthy of regard either for good or for evil.

These attacks the medical scholar must bear. They will never injure his position if he meets them in the right way, and the right way is that which shall lead him to be candid in regard to his own deficiencies, laborious in filling them up, and honest and earnest in protecting that which he knows and feels to be true.

In the performance of these duties is hidden, indeed, the morality of medicine; and thus moving onwards through life, the medical scholar, whether considered in his universal or individual capacity, must in the end conquer, and stand approved. The simple faith of his science is the sign of the simple faith of his whole being. Mysteries he has none to unfold to a favored few; secrets, not one to carry to the grave. The great living world is this man's priest, the illimitable space his confessional; and if the book of his life were closed but for a moment, he would wish it blotted out for ever.—*Glasgow Medical Journal.*

Congenital Absence of the Nose.—New Rhinoplastic Operation.—M. Maisonneuve, of Paris. has lately operated upon a child which presented a singular deformity of the face at birth, viz., complete

absence of the nasal prominence. This skilful surgeon devised and carried into successful execution, a new rhinoplastic operation, the ingenuity and simplicity of which are worthy the attention of surgeons.

Eugenie Marotte, seven months old, was born strong and well-formed, with the exception that she had no nasal prominence. In the place of this there was a plane surface, pierced by two small, round apertures, less than a line in diameter, and a little over an inch apart. This deformity not only rendered the child's face exceedingly grotesque, but also seriously embarassed the respiration, and, by consequence, the act of sucking.

It being very desirable to remedy these two difficulties, the parents brought the child to Paris with that intention.

There being no case on record, identical with this, the usual rhinoplastic procedures were unavailing. M. Maisonneuve planned the following ingenious operation.

On the 18th of May, 1855, the child being previously placed under the influence of chloroform, the surgeon made a transverse incision, a centimetre in length from each nasal aperture, from without, inwards. Two other vertical incisions, starting from the internal extremity of each of the former, were carried towards the free border of the lower lip, near which they approached each other and united into the form of a V. A narrow flap was thus formed by the latter incisions, and which included the entire thickness of the lip. This flap was dissected up and raised horizontally, so as to form the lower portion of the septum (*sous cloison*) of the artificial nose.

There then remained a factitious hare-lip; and its freshly divided edges were united by means of the twisted suture. In order, however, to obtain union, it became necessary that the space comprised between the nasal apertures should be lessened by the whole breadth of the detached flap above mentioned—and that, consequently, a projecting fold should be formed, at the expense of the intervening integument, and which, supported by the artificial septum above mentioned, might thus form, naturally, a perfectly regular nasal prominence. In order fully to understand the ingenious and simple mechanism of this operation, it will suffice to try it upon a piece of paper; it will at once be evident that the desired result may be obtained.

Complete cure was not obtained without some slight accidents. The child, irritated by pain, cried almost constantly, and kept in nearly continual motion for twenty-four hours. In consequence of this, the uppermost points of suture became partially detached; this, however, gave the operator an opportunity to perfect the union of the artificial hare-lip. His method of doing this was by dividing the *orbicularis oris* muscle on each side of the wound by subcutaneous incision; and thus laceration of the adhering edges, by the contraction of the muscular fibres, was prevented.

In this way, union went on uninterruptedly, notwithstanding the constant movements of the little patient; and when she was removed from Paris, the cure was complete. The nose was very regularly formed, and the nostrils, being largely open, allowed free respiration.—*Boston Med. and Surg. Journal, from Gazette des Hopitaux, December*, 1855.

Cure of Ague by Iodide of Potassium.—The object of my writing is to state to my professional brethren that I have used the iodide of potassium now in considerably more than a hundred cases, and have never yet failed in curing the disease very quickly. In some cases, where the disease has been of long standing, and the patient very much reduced, I have added a grain or two of quinine to each dose of the iodide of potassium; but my general prescription has been for an adult: ℞ Potas. iodid. ʒiss (?); aquæ menth. pip. ʒxij. M. Coch. mag. ij. 4tâ quâque horâ sumend. So that there could be no doubt what was the remedy that cured the disease. In proof of the value of this drug, I will only mention one case out of all that I have thus treated.

Mrs. Smith, aged 59, sent for me last month, having suffered from tertian ague, off and on, since September. Not being in very good circumstances, she went to the clergyman's wife of the parish in which she resided, who very kindly gave her some quinine, telling her it was no use sending for the medical man, as he must give her the same remedy. However, not getting well, she sent for me. After hearing what I have related, and finding that she had a tolerable pulse, her bowels open, and motions healthy, with a clean tongue, I sent her nothing but the above mixture; and she never had a return of the ague after the second she took of it.—*Mr. Sankey of Beckley, in Association Med. Jour., (in Dublin Med. Press.)*

Cure of Itch in Half an Hour.—Dr. E. Smith, at a meeting of the London Medical Society, called attention to an article in the *Gazette Hebdomadaire*, by Dr. Bourguignon, in which is a confirmation of the value of the treatment of itch, in Belgium, by sulphur, combined with lime, in a liquid form. The remedy is prepared by boiling one part of quick lime with two parts of sublimed sulphur, in ten parts of water, until the two former are perfectly united. During the boiling it must be constantly stirred with a piece of wood, and, when the sulphur and lime have combined, the fluid is to be decanted and kept in a well stoppered bottle. A pint of the liquid is sufficient for the cure of several cases. It is sufficient to wash the body well with warm water, and then to rub the liquid into the skin for half an hour. As the fluid evaporates, a layer of sulphur is left upon the skin. During the half hour the acarus is killed, and the patient is cured. It is only needful then to wash the body well, and to use clean clothes. In Belgium, the treatment is introduced by first rubbing the body for half an hour with black soap; but this does not appear to be necessary. The only essential act is that of the careful application of the fluid sulphur. The lime is of no importance in the treatment, except to render the sulphur soluble, and such would probably be the case if potass or soda were employed. The chief point in the plan thus employed, which is an improvement upon the mode of application of sulphur in substance with lard, is the more ready absorption of the remedy, and consequently the more certain and quick destruction of the insect, by using sulphur in a fluid form. In so disgusting a disease, it must be of great moment to be able to cure it in half an hour.—*Dublin Med. Press, from Association Med Jour.*

Abstract of Meteorological Observations for May, 1856, and for the Spring quarter ending May 31st, 1856, made at Philadelphia, Pa. Latitude 39° 57′ 28″ N., Longitude 75° 10′ 40″ W. from Greenwich.
By Prof. James A. Kirkpatrick.

1856. May.	Barometer. Daily Mean	Barometer. Mean Daily Range.	Thermom. Daily Mean	Thermom. Mean Daily Range	Rel. Humid. 2 P.M.	Force of Vapor 2 P.M.	Dew Point 2 P.M.	Rain	Prevailing Winds.	Remarks.
	Inches.	Inches.	Deg.	Deg.	Hunds.	Inches.	Deg.	Inches.	Points.	
1	30.076	.113	44.0	19.5	92	.265	41.8	1·262	NE.	*Raining* all day. *Barometer highest* 30.147.
2	29.669	.407	53.5	10.5	75	.350	49.2	0.117	NNE.	Cloudy; *rain* morning and night.
● 4	29.745	.096	54.2	7.2	82	.291	44.2	0.040	E.	From 11, A.M. to 10, P.M. *drizzling.*
5	29.969	.224	53.7	5.5	34	.176	31.3		NW.	Clear.
6	30.065	.134	57.7	0.8	40	.215	36.4		NW.	Clear.
7	29.867	.198	49.0	4.0	38	.228	37.9		(Var.)	Morning clear; afternoon and evening cloudy.
8	29.658	.209	46.7	8.7	82	.309	45.8	0.438	(Var.)	*Rain* all day, *drizzling.*
9	29.645	.018	49.7	2.3	85	.285	43.7	0.050	NE.	Cloudy; *rain drizzling* all day.
10	29.630	.015	50.0	3.0	83	.322	46.8	0.017	N.	Cloudy; morning, afternoon and night, *drizzling rain.*
D 11	29.640	.010	66.2	3.7	64	.268	42.2		NW.	Cloudy.
12	29.732	.092	73.3	16.2	32	.268	42.1		NW.	Clear.
13	30.009	.278	62.2	7.2	25	.268	42.1		(Var.)	Clear.
14	30.078	.080	65.5	11.8	49	.315	46.3		NE.	Cloudy.
15	30.006	.072	72.5	15.0	50	.430	54.8		S.	Morning and afternoon cloudy; evening clear.
16	29.888	.118	69.7	7.0	42	.388	51.9		S.	Morning and afternoon cloudy; evening clear.
17	29.823	.065	73.3	2.8	56	.483	58.0	0·040	S.	Cloudy; 4, P.M. to 10, P.M. *drizzling rain.*
18	29.725	.099	70.7	3.7	35	.322	46.9		(Var.)	Cloudy.
○ 19	29.672	.053	70.7	3.3	42	.408	53.4		E.	Morning and afternoon cloudy; evening clear.
20	29.596	.081	73.7	3.3	47	.418	54.0		SW.	Morning fog; afternoon cloudy; evening clear.
21	29.794	.198	71.0	3.0	30	.340	48.4		SW.	Morning fog; afternoon cloudy; evening clear.
22	29.991	.196	67.3	5.3	19	.149	27.4		NW.	Clear. Mosquitoes appear.
23	29.936	.057	73.3	4.3	24	.193	34.6		NW.	Clear.
24	29.717	.219	78.2	6.0	49	.435	55.1		SW.	Clear.
25	29.690	.132	64.7	4.8	50	.566	62.5		SW.	Morning and afternoon cloudy; evening clear. *Thermometer highest* 83.5°
◐ 26	29.720	.030	65.7	13.5	25	.176	31.3		NW.	Morning cloudy; afternoon and evening clear.
27	29.681	.070	70.0	9.7	26	.206	35.2		NW.	Morning cloudy; afternoon and evening clear.
28	29.427	.254	69.5	4.3	39	.330	47.6	0.039	SE.	Cloudy; *rain* during the night.
29	29.493	.071	69.0	4.8	75	.529	60.6	0.038	(Var.)	Morning and aft. cloudy and *showery;* evening clear. *Bar. lowest* 29.392.
30	29.715	.222	54.0	4.5	40	.349	49.1	0.283	W.	Morning and evening clear; afternoon a *shower.*
31	29.995	.279	55.0	15.0	46	.216	36.5	0.010	WNW.	
				7.0	36	.188	33.0		W.	Clear. *Thermometer lowest* 39°. Heavy hoar-frost; ice formed near the city.
Means for May, 1856	29.785	.113	62.7	7.0	49	.312	44.8	2.334	N. 59° 37′ W. 21-100.	
Means for May, 5 yrs.	29.843	.110	63.6	5 8	50	.367	50.3	4.175	N. 70° 17′ W. 20-100.	
Means for the Spring 1856	29.791	.159	50.2	6.3	53	.247	37.3	7.522	N. 82° 6′ W. 31-100.	
Means for the Spring 5 yrs.	29.830	.152	51.6	6.2	52	.267	40.7	11.402	N. 68° 41′ W. 24-100.	

The Monthly Range of the Mercury in the Barometer was 0.755 of an inch, and in the Thermometer 44.5°.